05/04/2011 12:05

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORW 3X	For Other Than An	Authorized Commi	ttee	Office Use Only
NAME OF COMMITTEE (in full)	USE FEC MAILING LAE OR TYPE OR PRINT	BEL Example:If typir over the lines	ng, type	
American College of Radiolo	ogy Association Political Ac	tion Committee		
ADDRESS (number and street)	1891 Preston White D	Orive 		
Check if different than previously reported. (ACC)	Reston		VA	20191
2. FEC IDENTIFICATION NUI	MBER ₩	CITY 🛕	STATE	ZIPCODE 🛕
C00343459		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(0) July 15 Quarterly Report(0) October 15 Quarterly Report(0) January 31 Quarterly Report(0) July 31 Mid-Year Report(Non-electic Year Only) (MY) Termination Report(TER)	(c) 12-Day PRE-Electic Report for the second of the second	he: Convention Election on General (3)	s (12C) S	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Dec 20 (M12) (Non-Election Year Only) Oct 20 (M10) Jan 31 (YE) Beneral (12G) In the State of Special (30S) In the State of
5. Covering Period 0	3 01 201	1 through	03	1 2011
I certify that I have examined this Type or Print Name of Treasurer	DD William Handard		is true, correct and co	mplete.
	,	iam Herrington mation may subject the pe	Date	0 5 0 4 2 0 1 1 ort to the penalties of 2 U.S.C 437g.
Office Use				FEC FORM 3X

FE6AN026

 $\textbf{A.} \quad \text{Form/Schedule}: \quad \textbf{F3XA}$

Transaction ID:

Had to edit the year end report due to a contribution that was not disbursed at the end of 2010. Due to that change the cash on hand at the beginning of the period had to be edited for this report.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name American College of Radiology Association Political Action Committee D D " D 03 0 1 2011 0.3 3 1 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011[°] 694551.36 January 1 (b) Cash on Hand at 791552.37 Begining of Reporting Period 105526.64 297170.96 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 897079.01 991722.32 6(a) and 6(c) for Column B) 181689.51 276332.82 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 715389.50 715389.50 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American College of Radiology Association Political Action Committee

М М 0 1 м м 3 1 2 0 1 1 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 96978.66 257912.02 (i) Itemized (use Schedule A) 8538.28 39234.78 (ii) Unitemized (iii) TOTAL (add 105516.94 297146.80 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 105516.94 297146.80 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 9.70 24.16 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 105526.64 297170.96 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts

FE6AN026

(subtract Line 18(c) from Line 19)

105526.64

297170.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures:
(a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))........... 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to Federal Candidates/Committees.....and Other Political Committees..... 179500.00 270500.00 24. Independent Expenditure 0.00 0.00 (use Schedule E) 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 270.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) Total Contribution Refunds 0.00 270.00 (add Lines 28(a), (b), and (c)) 2189.51 5562.82 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 181689.51 276332.82 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 181689.51 276332.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	105516.94	297146.80
34.	Total Contribution Refunds (from Line 28(d))	0.00	270.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	105516.94	296876.80
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 101 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Julie Timins Mailing Address 20 Footes Ln			Date of Receipt
City	State	Zip Code	0 3 0 3 2 0 1 1 Transaction ID: 39068115
Morristown FEC ID number of contributing federal political committee.	NJ C	07960-6356	Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed		c Radiologist	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. James Parker Mailing Address Lumberton Radiolog	nical Asso		Date of Receipt
209 W 27th St			03 03 2011
City	State NC	Zip Code	Transaction ID: 39068117
Lumberton FEC ID number of contributing federal political committee.	C	28358-3016	Amount of Each Receipt this Period 500.00
Name of Employer LRA	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. David Pennes	'		Date of Receipt
Mailing Address 2059 E Wyndham F	Hill Dr NE Apt 3	03	03 03 2011
City	State	Zip Code	Transaction ID: 39068118
Grand Rapids	MI	49505-6358	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Advanced Radiology Servic- es Receipt For:		c Radiologist	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		2500.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 101 (check only one) X 11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	American College of Radiology Associ	ation Politic	ai Action Committee	1
١.	Full Name (Last, First, Middle Initial) Dr. Kenneth Berkenstock Mailing Address Lancaster Radiology A	iotoo		Date of Receipt
	PO Box 3555			03 03 2011
	City Lancaster	State PA	Zip Code 17604-3555	Transaction ID: 39068129 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	17004 3333	84.00
	Name of Employer Lancaster Radiology Associates		n Oncologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
	Full Name (Last, First, Middle Initial) Dr. Jeffrey Kramer			Date of Receipt
	Mailing Address 2147 Meadow Ridge D	r		03 / 03 / 2011
	City	State	Zip Code	Transaction ID: 39068137
	Lancaster	PA	17601-5762	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Lancaster Radiology Assoc- iates	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	
_	Full Name (Last, First, Middle Initial) Dr. Paul Leslie			Date of Receipt
	Mailing Address 260 Eshelman Rd			03 03 2011
	City	State	Zip Code	Transaction ID: 39068138
	Lancaster	PA	17601-5645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Lancaster Radiology Assoc- iates	,	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			284.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 101 (check only one) X
or f	r information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
١	Full Name (Last, First, Middle Initial) Dr. Simon Westacott Mailing Address 1965 Glendower Dr			Date of Receipt 0 3 0 3 2 0 1 1
	City Lancaster	State PA	Zip Code 17601-4945	Transaction ID: 39068142 Amount of Each Receipt this Period
•	FEC ID number of contributing federal political committee.	C	17001-4343	100.00
	Name of Employer Lancaster Radiology Associates Receipt For: Primary General Other (specify) ▼	,	tic Radiologist e Year-to-Date ▼ 300.00]
3.	Full Name (Last, First, Middle Initial) Dr. Patrick Weybright Mailing Address 1234 Mastersonville F	ł Rd		Date of Receipt 0 3
	City	State	Zip Code	Transaction ID: 39068143
•	Manheim FEC ID number of contributing federal political committee.	C	17545-9461	Amount of Each Receipt this Period
	Name of Employer Lancaster Radiology Associates Receipt For:	, i – –	n tic Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Full Name (Last, First, Middle Initial) Dr. Philip Rogoff	<u> </u>		Date of Receipt
	Mailing Address 58 Rogers Rd			03 04 2011
	City Carlisle	State MA	Zip Code 01741-1865	Transaction ID: 39073162
	FEC ID number of contributing federal political committee.	C	01741-1803	Amount of Each Receipt this Period 500.00
•	Name of Employer Schatzki Associates, Inc.	Occupatio	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 500.00	
SL	JBTOTAL of Receipts This Page (optional)	1		700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 101 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Patti Mailing Address 11 Willard Ln City Lynnfield FEC ID number of contributing federal political committee. Name of Employer John A. Patti, M.D., Inc. Receipt For: Primary General Other (specify)	<u>-</u> -	Zip Code 01940-1735 n ic Radiologist Year-to-Date ▼ 2500.00	Date of Receipt M M M / D D A / Y Y Y Y Y Transaction ID: 39073163 Amount of Each Receipt this Period 2500.00
Full Name (Last, First, Middle Initial) Dr. Edward Bluth Mailing Address Ochsner Foundation 1514 Jefferson Hwy City New Orleans FEC ID number of contributing federal political committee. Name of Employer Ochsner Radiology Receipt For: Primary General Other (specify)	State LA C Occupation Diagnost	Zip Code 70121-2429 n ic Radiologist Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y O 3
Full Name (Last, First, Middle Initial) Dr. Melissa Yu Mailing Address 6 Ventana Ridge Dr City Aliso Viejo FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify)	_ ' 	Zip Code 92656-1849 n ic Radiologist Year-to-Date ▼	Date of Receipt M M M / D D M / 2011 Transaction ID: 39073172 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)			3750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 101 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	e name and address of any political committee t	ion for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Nicolas von dem Bussche Mailing Address 18662 Via Torino City Irvine FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Receipt For: Primary General Other (specify)	State Zip Code CA 92603-3438 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Winston Whitney Mailing Address 2189 Tustin Ave City Costa Mesa FEC ID number of contributing federal political committee. Name of Employer Newport Radiology Associates Receipt For: Primary General Other (specify)	State Zip Code CA 92627-1864 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 39073175 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Binh Nguyen Mailing Address 15521 Orchid Ave City Tustin FEC ID number of contributing federal political committee. Name of Employer Univ of South Alabama Med Center Receipt For: Primary General Other (specify)	State Zip Code CA 92782-1933 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D M / 2011 Transaction ID: 39073179 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional) .		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for eacl	parate schedule(s) h category of the d Summary Page	FOR LINE NUMBER: PAGE 12 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association	name and address of an	y political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Steven Oglevie Mailing Address 2515 Vista Drive City Newport Beach FEC ID number of contributing federal political committee. Name of Employer Newport Radiology Associates Receipt For: Primary General Other (specify)	State Zip C CA 9266 C Occupation Diagnostic Radiol Aggregate Year-to-D	3-5631 ogist	Date of Receipt M M O 3
Full Name (Last, First, Middle Initial) Dr. Wallace Peck Mailing Address 31 Mahogany Dr City Irvine FEC ID number of contributing federal political committee. Name of Employer Newport Radiology Associates Receipt For: Primary General Other (specify)	State Zip C CA 9262 C Occupation Diagnostic Radiol Aggregate Year-to-D	0-1232 ogist	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39073182 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Richard Rhee Mailing Address 7 Agostino City Newport Coast FEC ID number of contributing federal political committee. Name of Employer Newport Radiology Associates Receipt For: Primary General Other (specify)	State Zip C CA 9265 C Occupation Diagnostic Radiol Aggregate Year-to-D	7-1220 ogist	Date of Receipt M M / D D D / Y Y Y Y Y O 3 / D D D / 2 D 1 1 Transaction ID: 39073183 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		·····	750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to association Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Roossin Mailing Address 9 Sea Shell City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Newport Coast FEC ID number of contributing federal political committee.	CA 92657-1705	Amount of Each Receipt this Period 250.00
Name of Employer Newport Harbor Radiology Assoc. Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Roger Thomas Mailing Address 1636 Anita Ln		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39073229
Newport Beach	CA 92660-4804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newport Harbor Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. William Van Dalsem	<u>'</u>	Date of Receipt
Mailing Address Newport Harbor R 471 N Old Newpor	adiology Associate rt Blvd Ste 302	03 / 04 / 2011
City	State Zip Code	Transaction ID: 39073230
Newport Beach FEC ID number of contributing federal political committee.	CA 92663-4244	Amount of Each Receipt this Period 250.00
Name of Employer Newport Harbor Rad Assoc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	nal)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Dr. Luke Cheung Mailing Address 36 Plumeria		Date of Receipt M M
City	State Zip Code	Transaction ID: 39073233
Irvine	CA 92620-1999	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newport Harbor Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Miles Chang	L	Date of Receipt
Mailing Address Hoag Hospital PO Box 6100		03 04 2011
City	State Zip Code	Transaction ID: 39073237
Newport Beach	CA 92658-6100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newport Harbor Radiology Associates Me	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth Rall	L	Date of Receipt
Mailing Address 1904 Field Stone C	ot .	03 / 04 / 2011
City <u>Columbia</u>	State Zip Code MO 65203-5408	Transaction ID: 39073238 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	l)	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 101 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Leonard Berlin		Date of Receipt
Mailing Address 518 Meadow Dr W	Ctata 7'a Cada	03 / 04 / 2011
City Wilmette	State Zip Code IL 60091-2276	Transaction ID: 39073239 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self-employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Richard Taketa		Date of Receipt
Mailing Address 320 Evening Canyon		03 / 04 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39073240
Corona Del Mar FEC ID number of contributing federal political committee.	CA 92625-2638	Amount of Each Receipt this Period 250.00
Name of Employer Newport Harbor Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jon DeWitte		Date of Receipt
Mailing Address 1130 Spring Lake Dr		03 / 04 / 2011
City	State Zip Code	Transaction ID: 39073244
Bishop FEC ID number of contributing	GA 30621-1345	Amount of Each Receipt this Period 500.00
federal political committee. Name of Employer Athens Radiology Associat-	Occupation	
es, P.C.	Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
		1750.00
SUBTOTAL of Receipts This Page (optional) .		

SCHEDULE A (FEC Form	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16/101 (check only one)
Any information copied from such Repor or for commercial purposes, other than u	ts and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology	Association Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Amy Kirby			Date of Receipt
Mailing Address 5209 Pulchella	Drive		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39073245
Oklahoma City FEC ID number of contributing federal political committee.	OK C	73142-6811	Amount of Each Receipt this Period 150.00
Name of Employer Eagle Eye Imaging	Occupation	n ly Resident	7
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Warfel			Date of Receipt
Mailing Address 2213 NE 160th	Ave		0 3 0 4 2 0 1 1
City	State	Zip Code	Transaction ID: 39073246
Vancouver FEC ID number of contributing federal political committee.	C	98684-4501	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Specialists of the Northwest	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Gayle Roulier			Date of Receipt
Mailing Address Vista Radiology 2001 Laurel Av	e Ste 304		03 04 2011
City Knoxville	State TN	Zip Code 37916-1834	Transaction ID: 39073247 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Vista Radiology, P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	- 1 ' 	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (op	Lanal)		650.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 101 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Lawrence Liebscher Mailing Address 2615 W 4th St City Waterloo FEC ID number of contributing federal political committee. Name of Employer Cedar Valley Medical Specialists, PC Receipt For: Primary Other (specify)	State Zip Code IA 50701-4050 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39073248 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Dr. Jacqueline Bello Mailing Address Montefiore Medical 111 E 210th St City Bronx FEC ID number of contributing federal political committee. Name of Employer Montefiore Medical Center Receipt For: Primary General Other (specify)	Center State Zip Code NY 10467-2401 C Occupation Neuroradiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. William G. Bradley, JR Mailing Address Univ of CA-San Die 402 Dickinson St S City San Diego FEC ID number of contributing federal political committee. Name of Employer University of California San Diego Receipt For: Primary General Other (specify)		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	al)	3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 101 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Brigid Gerety			Date of Receipt
Mailing Address 619 W Lake Dr			03 11 2011
City	State	Zip Code	Transaction ID: 39220344
Athens	GA	30606-4138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Athens Radiology Associat-	Occupation	c Radiologist	
es, P.C. Receipt For:		Year-to-Date V	\dashv
Primary General Other (specify) ▼	Aggregate	500.00	
Full Name (Last, First, Middle Initial) Dr. Shane Kudela			Date of Receipt
Mailing Address 1061 Shady Creek Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39220345
<u>Bogart</u>	GA	30622-3098	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Athens Radiology Associat- es	Occupation Diagnosti	r c Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth Hite			Date of Receipt
Mailing Address 434 New Britain Dr			03 11 2011
City	State	Zip Code	Transaction ID: 39220346
Lynchburg	VA	24503-2143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Radiology Consultants of Lynchburg	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
			1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	ne name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Krishna Thirumala		Date of Receipt
Mailing Address Drs. Mori, Bean & bro 3599 University Blvd		03 11 2011
City Jacksonville	State Zip Code FL 32216-4245	Transaction ID: 39220349 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32210-4243	250.00
Name of Employer Drs. Mori, Bean & Brooks, P.A. Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	0 0
Full Name (Last, First, Middle Initial) Dr. Anne Roberts Mailing Address UCSD Med Ctr Thorr		Date of Receipt
9300 Campus Point I	Or State Zip Code	0 3 1 1 2 0 1 1 Transaction ID: 39220350
<u>La Jolla</u>	CA 92037-1398	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer UCSD Medical Center	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Alan Holz		Date of Receipt
Mailing Address 10471 Lone Star PI		03 11 2011
City	State Zip Code	Transaction ID: 39220351
Davie	FL 33328-1344	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Hollywood	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	er only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	ny information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	ciation Politic	al Action Committee	
۸.	Full Name (Last, First, Middle Initial) Dr. Kathleen Ward			Date of Receipt
	Mailing Address 13131 S Longwood C			03 / 11 / 2011
	City Palos Park	State IL	Zip Code 60464-2184	Transaction ID: 39220352 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Loyola University Physici- an Foundation	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. William Lowry			Date of Receipt
	Mailing Address Radiology Assoc of Ta 816 W Cannon St	arrant Co PA	1	03 / 11 / Y Y Y Y Y Y Y
	City Fort Worth	State TX	Zip Code 76104-3146	Transaction ID: 39220353
	FEC ID number of contributing federal political committee.	C	70104-3140	Amount of Each Receipt this Period 1000.00
	Name of Employer Radiology Associates of North Texas	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
. –	Full Name (Last, First, Middle Initial) Dr. John Braud			Date of Receipt
	Mailing Address 9611 Norris Ferry Rd			03 11 2011
	City	State	Zip Code	Transaction ID: 39220356
	Shreveport FEC ID number of contributing federal political committee.	C	71106-7719	Amount of Each Receipt this Period 250.00
	Name of Employer Northshore Imaging Associ- ates	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional) .			1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 101 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	
American College of Radiology Ass	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Kay Lozano		Date of Receipt
Mailing Address 8100 E Union Ave A		03 / 11 / 2011
City Denver	State Zip Code CO 80237-2979	Transaction ID: 39220357
FEC ID number of contributing federal political committee.	C 80231-2919	Amount of Each Receipt this Period 2500.00
Name of Employer Radiology Imaging Associa- tion	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen		Date of Receipt
Mailing Address 6612 Cliffbrook Dr		03 / 014 / 2011
City	State Zip Code	Transaction ID: 39229856
<u>Dallas</u>	TX 75254-8613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Southwest Imaging & Inter- ven specialis	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	436.68	
Full Name (Last, First, Middle Initial) Dr. Charles Burkett		Date of Receipt
Mailing Address PO Box 48		03 14 2011
City	State Zip Code	Transaction ID: 39229868
Daytona Beach	FL 32115-0048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Descripts This Days (actions	J)	3010.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	X 11a 11b 11c 12
or for commercial purposes, other than using	and Statements may not be sold or used by any p g the name and address of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Oscar Carbonell		Date of Receipt
Mailing Address 12 Broadriver Rd		03 / 014 / 2011
City	State Zip Code	Transaction ID: 39229869
Ormond Beach	FL 32174-8743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of	Occupation	
Daytona Beach	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Joseph Cox		Date of Receipt
Mailing Address 1920 W Granada I	Blvd	03 14 2011
City	State Zip Code	Transaction ID: 39229870
Ormond Beach	FL 32174-6739	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Levy		Date of Receipt
Mailing Address 2141 Villa Way		03 14 2011
City	State Zip Code	Transaction ID: 39229871
New Smyrna Beach	FL 32169-2089	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (option	al)	750.00

	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any per the name and address of any political committee ociation Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Schiering Mailing Address 1 Willow Oaks Trl City Ormond Beach	State Zip Code FL 32174-4956	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Daytona Beach	Occupation Radiologist	500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Daniel Miles Mailing Address 3554 John Anderso	n Dr	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Ormond Beach	State Zip Code FL 32176-2114	Transaction ID: 39229873 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32170-2114	500.00
Name of Employer Radiology Associates of Daytona Beach Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Melvin Stone		Date of Receipt
Mailing Address 32 N Saint Andrews	s Dr	M M / D D / Y Y Y Y Y O 3 1 4 2 0 1 1
City	State Zip Code	Transaction ID: 39229874
Ormond Beach FEC ID number of contributing federal political committee.	FL 32174-3839	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any per- the name and address of any political committee ociation Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. David Turetsky		Date of Receipt
Mailing Address 608 John Anderson		03 14 2011
City Ormond Beach	State Zip Code FL 32176-4763	Transaction ID: 39229875
FEC ID number of contributing federal political committee.	FL 32176-4763	Amount of Each Receipt this Period 500.00
Name of Employer Radiology Associates of Daytona Beach Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Yuschok		Date of Receipt
Mailing Address 162 Laurelwood Ln		03 14 2011
City	State Zip Code	Transaction ID: 39229876
Ormond Beach FEC ID number of contributing federal political committee.	FL 32174-4227	Amount of Each Receipt this Period 500.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Michael Shortsleeve		Date of Receipt
Mailing Address 4 Granville Rd		03 14 2011
City	State Zip Code	Transaction ID: 39229877
Lincoln	MA 01773-3106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1500.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 101 (check only one) X
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated the Name of College of Radiology	e name and ad	Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Philip Rogoff Mailing Address 58 Rogers Rd City Carlisle FEC ID number of contributing federal political committee.	State MA C	Zip Code 01741-1865	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Schatzki Associates, Inc. Receipt For: Primary Other (specify) ▼	Diagnos	tic Radiologist e Year-to-Date 1000.00	
В.	Full Name (Last, First, Middle Initial) Dr. Ralph Reichle Mailing Address 259 Independence Ro	I		Date of Receipt 0 3 1 4 2 0 1 1
	City	State	Zip Code	Transaction ID: 39229879
	Concord FEC ID number of contributing federal political committee.	C	01742-2655	Amount of Each Receipt this Period 500.00
	Name of Employer Schatzki Associates, Inc. Receipt For: Primary Other (specify) ▼	, i	on tic Radiologist e Year-to-Date ▼ 500.00	
С.	Full Name (Last, First, Middle Initial) Dr. Jacques Pierre Sasson Mailing Address 228 Wolcott Rd			Date of Receipt 0 3 1 4 2 0 1 1
	City	State	Zip Code	Transaction ID: 39229880
	Chestnut Hill FEC ID number of contributing federal political committee.	C	02467-3170	Amount of Each Receipt this Period 500.00
	Name of Employer Schatzki Associates, Inc.	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			1500.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 101 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Edward B. Marianacci Mailing Address 177 Walnut St			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Newton FEC ID number of contributing	State MA	Zip Code 02460-1601	Transaction ID: 39229881 Amount of Each Receipt this Period 500.00
Receipt For: Primary Other (specify) ▼	Occupation Diagnost	n ic Radiologist e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Siew Teoh Mailing Address 196 E Emerson Rd			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39229884
Lexington FEC ID number of contributing federal political committee.	C	02420-2134	Amount of Each Receipt this Period 500.00
Name of Employer Schatzki Associates, Inc. Receipt For:		n ic Radiologist e Year-to-Date ▼	
Primary General Other (specify) ▼	7 iggi ogalo	500.00	
Full Name (Last, First, Middle Initial) Dr. Alejandro Heffess Mailing Address 75 Centre Street			Date of Receipt
			03 14 2011
City Brookline	State MA	Zip Code 02446-2833	Transaction ID: 39229885 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Schatzki Associates, Inc.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1500.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. George Cushing, JR Mailing Address Mount Auburn Hospita 330 Mt Auburn St City	al State	Zip Code	Date of Receipt M
	<u>Cambridge</u>	MA	02138-5502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Schatzki Associates, Inc. Receipt For: Primary General Other (specify) ▼	,	tic Radiologist e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Jeremy Schiller Mailing Address 14 Broad St	1		Date of Receipt 0 3 1 4 2 0 1 1
	City	State	Zip Code	Transaction ID: 39229887
	Salem	MA	01970-3144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Schatzki Associates, Inc.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Dr. Arpita Swami	<u> </u>		Date of Receipt
	Mailing Address 32 Garrison St Apt 50	102		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 39229888
	Boston	MA	02116-5700	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-Employed	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
t	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 101 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Assoc	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Charles Langston Mailing Address Mt Auburn Hospital		Date of Receipt
330 Mt Auburn St		03 14 2011
City	State Zip Code	Transaction ID: 39229894
<u>Cambridge</u>	MA 02138-5597	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	1
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Hyewon Hyun		Date of Receipt
Mailing Address Mount Auburn Hospita 330 Mount Auburn St		03 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39229895
Cambridge	MA 02138-5502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00]
Full Name (Last, First, Middle Initial) Dr. Jose Arbona		Date of Receipt
Mailing Address 11403 Cat Spgs		03 14 2011
City	State Zip Code	Transaction ID: 39229896
<u>Boerne</u>	TX 78006-8487	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Radiology Associates of San Antonio	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional) .		2000.00
TOTAL This Period (last page this line number	•	

or t	y information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoful Name (Last, First, Middle Initial) Dr. Richard Benedikt	e name and address of any political con	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
	American College of Radiology Asso	ciation Political Action Committee	
			9
			Date of Receipt
	Mailing Address 501 Patterson Ave		0 3
	City	State Zip Code	Transaction ID: 39229897
	San Antonio	TX 78209-5632	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		0.00
	Full Name (Last, First, Middle Initial) Dr. Gilberto Cadavid		Date of Receipt
	Mailing Address 5 Camden Oaks		03 14 2011
	City	State Zip Code	Transaction ID: 39229898
	San Antonio	TX 78248-1601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Radiology Associates of San Antonio	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	50	0.00
	Full Name (Last, First, Middle Initial) Dr. Keith Crow	_ L	Date of Receipt
	Mailing Address 523 Berwick Town		0 3
	City	State Zip Code	Transaction ID: 39229902
	San Antonio	TX 78249-2080	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	50	0.00
Ci Ci	JBTOTAL of Receipts This Page (optional)	L	2000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each o	rate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 30 / 101 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	ne name and address of any p	political committee to s	for the purpose of soliciting contributions
American College of Radiology Asso	clation Political Action C	ommittee	
Full Name (Last, First, Middle Initial) Dr. David Golden Mailing Address 411 Happy Trail			Date of Receipt
Mailing Address 411 Happy Trail City	State Zip Cod	e	0 3 1 4 2 0 1 1 Transaction ID: 39229903
San Antonio	TX 78231-1		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer South Texas Radiology Gro- up	Occupation Diagnostic Radiolog	jist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1000.00	
Full Name (Last, First, Middle Initial) Dr. W Lawrence Greif			Date of Receipt
Mailing Address 130 Box Oak			03 14 2011
City	State Zip Cod	е	Transaction ID: 39229904
San Antonio	TX 78230-5	5628	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiolog	jist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	500.00	
Full Name (Last, First, Middle Initial) Dr. G Christopher Hammet			Date of Receipt
Mailing Address 231 W Lynwood Ave			03 14 YYYY 2011
City	State Zip Cod		Transaction ID: 39229905
San Antonio	TX 78212-2	2323	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiolog		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	250.00	
SUBTOTAL of Receipts This Page (optional)	•		1750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin	and Statements may not be sold or used by any person g the name and address of any political committee to a sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mark Healy Mailing Address 207 Blackjack Oal City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify)	State Zip Code TX 78230-5617 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39229907 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Dr. James Lutz Mailing Address 307 Geneseo Rd City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Receipt For: Primary General	State Zip Code TX 78209-6124 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Joseph McColley Mailing Address 314 Post Oak Wa City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Gro-	State Zip Code TX 78230-5623 C Occupation Diagnostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 4 2 0 1 1 Transaction ID: 39229910 Amount of Each Receipt this Period 500.00
up, P.A. Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (option	Aggregate Year-to-Date ▼ 500.00	6500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32/101 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As:	sociation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Orsi			Date of Receipt
Mailing Address 6635 Biscay Bay			03 14 2011
City San Antonio	State TX	Zip Code 78249-2572	Transaction ID: 39229911
FEC ID number of contributing federal political committee.	C	10245-2312	Amount of Each Receipt this Period 500.00
Name of Employer University of Texas Health Science Cen Receipt For:		n y Resident Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	500.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth Rugh			Date of Receipt
Mailing Address 4 Lazy Hollow St			03 14 2011
City San Antonio	State TX	Zip Code	Transaction ID: 39229914
FEC ID number of contributing federal political committee.	C	78230-5224	Amount of Each Receipt this Period 1000.00
Name of Employer Radiology Associates of	Occupation	n ic Radiologist	
San Antonio Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)			Data of Bassint
Dr. Ezequiel Silva, III Mailing Address 120 W Lynwood Av	ve		Date of Receipt 0 3 1 4 2 0 1 1
City	State	Zip Code	Transaction ID: 39229915
San Antonio FEC ID number of contributing federal political committee.	C	78212-2497	Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (options			2500.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person ng the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology A	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. John Stoll		Date of Receipt
Mailing Address 110 Cherokee Ln		0 3
City	State Zip Code	Transaction ID: 39229916
San Antonio	TX 78232-2902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro-	Occupation	7
up, P.A. Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Alvin Thaggard, III	I	Date of Receipt
Mailing Address 104 Cross Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39229917
San Antonio	TX 78209-5909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)		Date of Descript
Dr. John Thomas Mailing Address 13651 Treasure T	rail Dr	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39229918
San Antonio	TX 78232-3508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person the name and address of any political committee association Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Todd Tibbetts Mailing Address 804 Evans Ave	7. 0.4	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City San Antonio FEC ID number of contributing	State Zip Code TX 78209-3649 C	Transaction ID: 39229927 Amount of Each Receipt this Period 400.00
Name of Employer South Texas Radiology Gro- up, P.A. Receipt For: Primary Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Jorge Velez Mailing Address 6 Lost Timbers		Date of Receipt 0 3 1 4 2 0 1 1
City	State Zip Code	Transaction ID: 39229928
San Antonio	TX 78248-1661	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro- up	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Joseph Williams Mailing Address 22 Parman PI		Date of Receipt
City	State Zip Code	0 3 1 4 2 0 1 1 Transaction ID: 39229929
San Antonio	TX 78230-4138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
CURTOTAL of Possints This Page (ention	al)	3400.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 101 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements may not be sold or used by any persign the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Donald Willig		Date of Receipt
Mailing Address 100 Creek Spgs		03 14 2011
City	State Zip Code	Transaction ID: 39229930
Boerne	TX 78006-9270	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	\dashv
Name of Employer South Texas Radiology Gro- up, P.A.	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. James Brink		Date of Receipt
Mailing Address Yale Univ Sch of N 333 Cedar St TE 2	2-224	03 / 04 / 4 2011
City	State Zip Code	Transaction ID: 39230048
New Haven	CT 06510-3206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Yale Univ Sch of Med	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Jay Lichman		Date of Receipt
Mailing Address 610 Kings Rd		03 14 YYYY 2011
City	State Zip Code	Transaction ID: 39230051
Newport Beach	CA 92663-5712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newport Harbor Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		2250.00

ay not be sold or used by any peddress of any political committee cal Action Committee Zip Code 92019-3730 on stic Radiologist te Year-to-Date 250.00	Date of Receipt Date of Receipt M M M J D D J 2 0 1 1 Transaction ID: 39230053 Amount of Each Receipt this Period 250.00
Zip Code 92019-3730 on stic Radiologist te Year-to-Date ▼	Transaction ID: 39230053 Amount of Each Receipt this Period 250.00
Zip Code 50702-5040	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 5 2 0 1 1 Transaction ID: 39241389 Amount of Each Receipt this Period 2500.00
on on Oncologist te Year-to-Date ▼ 2500.00	
	Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y
Zip Code 94025-5902	Transaction ID: 39241391 Amount of Each Receipt this Period 250.00
diology Fellow	
	on adiology Fellow te Year-to-Date ▼

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 101 (check only one) X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) merican College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>Dr</u>	Il Name (Last, First, Middle Initial) . Salil Parikh			Date of Receipt
	ailing Address 9477 Johnson Rd Ext	Stata	7in Codo	03 15 2011
Cit Ge	ermantown	State TN	Zip Code 38139-3603	Transaction ID: 39241396 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C		250.00
Na Ra	ame of Employer adiology Assoc of Ocala	Occupatio Diagnost	n ic Radiologist	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
. Dr	Il Name (Last, First, Middle Initial) . Richard McWhorter ailing Address 5221 U.S. Route 60 Ea	l est		Date of Receipt
IVIC	ming Address 5221 U.S. Route 60 Ea	03 15 2011		
Cit	•	State	Zip Code	Transaction ID: 39241397
FE	untington EC ID number of contributing	C	25705	Amount of Each Receipt this Period 500.00
	deral political committee.			
Na Ra	ame of Employer adiology Inc.	Occupatio Diagnost	n ic Radiologist	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	II Name (Last, First, Middle Initial) . Clarence Davis, III			Date of Receipt
Ma	ailing Address 627 Springlake Rd			03 15 2011
Cit	ty	State	Zip Code	Transaction ID: 39241401
<u>Co</u>	olumbia	SC	29206-2150	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
Le <u>iat</u>		. '	ic Radiologist	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUB.	TOTAL of Receipts This Page (optional)			1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. John Lohnes, JR			Date of Receipt
	Mailing Address Wichita Radiological (PO Box 8903	Group PA		03 15 2011
	City Wichita	State KS	Zip Code	Transaction ID: 39241402
	FEC ID number of contributing federal political committee.	C	67208-0903	Amount of Each Receipt this Period 250.00
	Name of Employer Wichita Radiological Group PA	Occupation Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
– В.	Full Name (Last, First, Middle Initial) Dr. Bibb Allen, JR	1		Date of Receipt
	Mailing Address 3245 E Briarcliff Rd			03 15 2011
	City	State	Zip Code	Transaction ID: 39241403
	Birmingham FEC ID number of contributing federal political committee.	C	35223-1304	Amount of Each Receipt this Period 625.00
	Name of Employer Montclair Baptist Medical Center	, '	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 625.00]
_ C.	Full Name (Last, First, Middle Initial) Dr. Steven Miller	1		Date of Receipt
	Mailing Address 23 Moffat Rd			03
	City	State	Zip Code	Transaction ID: 39241404
	Waban FEC ID number of contributing federal political committee.	C	02468-1112	Amount of Each Receipt this Period 250.00
	Name of Employer Newton Wellesley Hosp	Occupation Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1125.00
	TOTAL This Period (last page this line number	only)	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39/101 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Thomas Poulton			Date of Receipt
Mailing Address Aultman Hospital 2600 6th St SW			03 15 2011
City	State	Zip Code	Transaction ID: 39241406
Canton	OH	44710-1799	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Aultman Hospital	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Timothy Farrell			Date of Receipt
Mailing Address 128 Killarney			03 / 15 / Y Y Y Y
City	State	Zip Code	Transaction ID: 39241408
Williamsburg	VA	23188-8415	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Peninsula Radiology	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Conlin			Date of Receipt
Mailing Address 6590 Andersonville	Rd		03 15 2011
City	State	Zip Code	Transaction ID: 39241414
Clarkston	MI	48346-2794	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer DRA of Flint, PC	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		300.00]
			600.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 101 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associated American College (In Full)	ciation Politic	al Action Committee	
۷.	Full Name (Last, First, Middle Initial) Dr. Kevin O'Brien			Date of Receipt
	Mailing Address St Johns Macomb Ho 11800 E 12 Mile Rd	spital		03 / 15 / 2011
	City Warren	State MI	Zip Code	Transaction ID: 39241417
	FEC ID number of contributing federal political committee.	C	48093-3494	Amount of Each Receipt this Period 83.34
	Name of Employer Diagnostic Radiology Consultants, PC Receipt For: Primary General Other (specify) ▼	_ ' 	on tic Radiologist e Year-to-Date ▼ 250.02	
_	Full Name (Last, First, Middle Initial) Dr. Terry Martin			Date of Receipt
	Mailing Address Rad Assoc of Biirming 2090 Columbiana Rd	03 15 2011		
	City	State AL	Zip Code	Transaction ID: 39241418
	Birmingham		35216-2152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Rad Assoc of Biirmingham PC	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	
_	Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen	1		Date of Receipt
	Mailing Address 6612 Cliffbrook Dr			03 15 2011
	City	State	Zip Code	Transaction ID: 39241421
	Dallas	TX	75254-8613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.34
	Name of Employer Southwest Imaging & Inter- ven specialis		tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 645.02	
	SUBTOTAL of Receipts This Page (optional)			391.68

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 101 (check only one) X
,	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\angle	American College of Radiology Assoc	lation Politic	al Action Committee	
۱.	Full Name (Last, First, Middle Initial) Dr. Demetrius Morros Mailing Address 7418 Ridgecrest Cour	+ Dd		Date of Receipt
				03 15 2011
	City Birmingham	State AL	Zip Code 35242-0525	Transaction ID: 39241423
	FEC ID number of contributing federal political committee.	C	33242-0323	Amount of Each Receipt this Period 83.34
	Name of Employer Birmingham Radiological Group P.C. Receipt For: Primary General Other (specify) ▼	, '	n cic Radiologist e Year-to-Date ▼ 250.02	
_	Full Name (Last, First, Middle Initial) Dr. Raymond A. Armstrong			Date of Receipt
	Mailing Address Radiology of Huntsvill 2006 Franklin St SE S	03 15 2011		
	City	State	Zip Code	Transaction ID: 39241427
	Huntsville FEC ID number of contributing federal political committee.	C	35801-4537	Amount of Each Receipt this Period 100.00
	Name of Employer Baptist Medical Ctr-Montc- lair	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) Dr. Paul Lampert			Date of Receipt
	Mailing Address 11595 E 26th St			03 15 2011
	City	State	Zip Code	Transaction ID: 39241428
	Yuma	AZ	85367-2203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer MDIG	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)			308.34

П	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 101 (check only one) X
A OI	ny information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association	ciation Politic	al Action Committee	
۱.	Full Name (Last, First, Middle Initial) Dr. Kevin Smith Mailing Address Regional Diagnostic F	N. P. L.		Date of Receipt
	Mailing Address Regional Diagnostic F 1406 6th Ave N	Radiology		03 / 15 / 2011
	City	State	Zip Code	Transaction ID: 39241434
	Saint Cloud	MN	56303-1900	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.34
	Name of Employer Regional Diagnostic Radio- logy	Occupatio Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	625.02	
	Full Name (Last, First, Middle Initial) Dr. John Legan			Date of Receipt
	Mailing Address 1135 Hurricane Hill Re	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 39276813
	Dyersburg	TN	38024-6819	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Independent Radiology Associates	Occupatio Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
. –	Full Name (Last, First, Middle Initial) Dr. H Jay Zeskind			Date of Receipt
	Mailing Address 4870 Park Hill Dr			03 / 18 / 2011
	City	State	Zip Code	Transaction ID: 39276897
	West Bloomfield	MI	48323-3574	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Diagnostic Radiology Cons- ultants, PC	Occupatio Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
		1		1508.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 101 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Bognanno Mailing Address 1774 Hourglass Dr City Carmel FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify)	State Zip Code IN 46032-7299 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 8 2 0 1 1 Transaction ID: 39276900 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Scott Childress Mailing Address 7340 Shadeland Sta City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For:	State Zip Code IN 46256-3980 C Occupation Diagnostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y 0 3 1 8 2 0 1 1 Transaction ID: 39276901 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Karen Ehrman Mailing Address Irvington Radiologis 7340 Shadeland Sta City Indianapolis FEC ID number of contributing federal political committee.	State Zip Code IN 46256-3980	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 8 2 0 1 1 Transaction ID: 39276902 Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 101 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Bryan Hankins		Date of Receipt
Mailing Address 9654 Pleasant View	v Ln	03 18 2011
City	State Zip Code	Transaction ID: 39276903
Zionsville	IN 46077-9817	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Todd Harris	I	Date of Receipt
Mailing Address 5880 Sunset Ln		M M / D D / Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39276904
Indianapolis	IN 46228-1450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Susan Ivancevich	I	Date of Receipt
Mailing Address 365 East 75th Stree	et	0 3 1 8 2 0 1 1
City Indianapolis	State Zip Code IN 46240-2845	Transaction ID: 39276905 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45/101 (check only one)		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee			
Full Name (Last, First, Middle Initial) Dr. Kenyon K. Kopecky			Date of Receipt		
Mailing Address 650 Sugarbush Dr			03 18 2011		
City Zionsville	State IN	Zip Code 46077-1907	Transaction ID: 39276906 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Irvington Radiologists, PC	Occupation Diagnost	n ic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Jean Kraft			Date of Receipt		
Mailing Address 5187 Sue Dr					
City Carmel	State IN	Zip Code 46033-8669	Transaction ID: 39276907 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Irvington Radiologists, P.C.	Occupation	n ic Radiologist			
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. David Kurlander			Date of Receipt		
Mailing Address 12511 Glendurgan	Dr		03 18 2011		
City Carmel	State IN	Zip Code 46032-8314	Transaction ID: 39276908 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	10002 0017	250.00		
Name of Employer Irvington Radiologists, P.C.		ic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (optional	al)		750.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	e name and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Dale McCarter Mailing Address 7150 N Pennsylvania City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologist Receipt For: Primary General	State IN C Occupation Diagnosti	Zip Code 46240-3036 10 10 C Radiologist Year-to-Date ▼	Date of Receipt 0 3
Other (specify) Full Name (Last, First, Middle Initial) Dr. Dennis Myers Mailing Address 4412 W Easy St City New Palestine FEC ID number of contributing federal political committee.	State IN	Zip Code 46163-8638	Date of Receipt M M M / D D / Y Y Y Y Y O 3 18 2011 Transaction ID: 39276913 Amount of Each Receipt this Period 250.00
Name of Employer Medical College of Ohio Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Bruce Richmond	_ · _ ·	n c Radiologist Year-to-Date ▼ 250.00	Date of Receipt
Mailing Address 8106 Halyard Way City Indianapolis FEC ID number of contributing federal political committee.	State IN	Zip Code 46236-9567	Transaction ID: 39276914 Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify) ▼	_ ' 	n c Radiologist Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	1		750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	Full Name (Last, First, Middle Initial)	iation Foitic	al Action Committee	
۱.	Dr. Scott Savader Mailing Address Irvington Radiologists 7340 Shadeland Static	PC		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 39276915
	Indianapolis	IN	46256-3980	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Irvington Radiologists, P.C.	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Paul Smart	1		Date of Receipt
	Mailing Address PO Box 150850	03 18 2011		
	City	State	Zip Code	Transaction ID: 39276916
	Cape Coral	FL	33915-0850	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
_	Full Name (Last, First, Middle Initial) Dr. Stephan Stockberger, JR			Date of Receipt
	Mailing Address 12909 Rocky Pointe F	Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 39276917
	Mc Cordsville	<u>IN</u>	46055-9582	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Irvington Radiologists, P.C.	, ' 	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			750.0

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 101 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and S or for commercial purposes, other than using the S or for commercial purposes.	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Swack Mailing Address 9703 Hunt Club Rd City Zionsville FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify)	,	Zip Code 46077-8454 n cic Radiologist e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39276918 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Perry Wethington Mailing Address 12060 Landover Lane City Fishers FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify)	, '	Zip Code 46038-9548 n tic Radiologist e Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39276919 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Joseph Yedlicka Mailing Address 9034 Bay Breeze Ct City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify)	. '	Zip Code 46236-9170 n cic Radiologist e Year-to-Date ▼ 250.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any person sing the name and address of any political committee to Association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Catherine Kurowski Mailing Address 528 E 56th St City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Self-Employed	State Zip Code IN 46220-3067 C Occupation Diagnostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39276921 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jody Barber Mailing Address 19445 County R City Bristol	d 16 State Zip Code IN 46507-8951	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 8 2 0 1 1 Transaction ID: 39276922 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Radiology Inc. Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Dr. Daniel Boll Mailing Address Radiology Inc PO Box 1258 City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
South Bend FEC ID number of contributing federal political committee.	IN 46624-1258	Amount of Each Receipt this Period 250.00
Name of Employer Radiology, Inc Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (opti	onal)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Brendle Mailing Address 211 Highland Park City Middlebury FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General	Dr State Zip Code IN 46540-9071 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39276924 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Albert Cho Mailing Address 51230 Pine Croft C	250.00 t	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City South Bend FEC ID number of contributing federal political committee. Name of Employer Loyola Univ Medical Center Receipt For: Primary General Other (specify)	State Zip Code IN 46637-6047 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Transaction ID: 39276925 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. David D'Andrea Mailing Address 51326 Amesburry \ City Granger	Vay State Zip Code IN 46530-4829	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	250.00
SUBTOTAL of Receipts This Page (optional	al)	750.00

A. Full Dr. Nail City Elkl	ommercial purposes, other than using the of COMMITTEE (In Full) erican College of Radiology Associal Name (Last, First, Middle Initial) Mary Dynes ng Address Elkhart General Hosp 600 East Blvd	name and add	lress of any political committee to	Date of Receipt Date of Receipt 18
A. Full Dr. Mail City Elk FEC fede	erican College of Radiology Associa Name (Last, First, Middle Initial) Mary Dynes ng Address Elkhart General Hosp 600 East Blvd Plant ID number of contributing ral political committee. le of Employer	State IN	Zip Code	Transaction ID: 39276931 Amount of Each Receipt this Period
A. Dr. Mail City Elkl FEC	Mary Dynes Ing Address Elkhart General Hosp 600 East Blvd Inart ID number of contributing ral political committee. In of Employer	IN C	·	Transaction ID: 39276931 Amount of Each Receipt this Period
City Elkl FEC fede	600 East Blvd nart ID number of contributing ral political committee.	IN C	·	Transaction ID: 39276931 Amount of Each Receipt this Period
Elkl FEC fede	ID number of contributing ral political committee.	IN C	·	Amount of Each Receipt this Period
FEC fede	ID number of contributing ral political committee.	С	46514-2499	
fede	ral political committee.			250.00
	e of Employer iology, Inc.	Occupation		
Nam Rad			n c Radiologist	
Rec	eipt For:	Aggregate	Year-to-Date ▼	_
	Primary General Other (specify) ▼		250.00	
	Name (Last, First, Middle Initial) Nan Engel			Date of Receipt
	ng Address 50741 Ashford Ln			03 / 18 / Y Y Y Y Y Y Y
City		State IN	Zip Code	Transaction ID: 39276932
FEC	Inger ID number of contributing ral political committee.	C	46530-8423	Amount of Each Receipt this Period 250.00
Nam Rad	e of Employer iology, Inc.	Occupation Diagnosti	c Radiologist	
Rec	eipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
	Name (Last, First, Middle Initial) Thomas Fischbach			Date of Receipt
Mail	ng Address 50600 Fox Trl			0 3 1 8 2 0 1 1
City		State	Zip Code	Transaction ID: 39276933
<u>Gra</u>	nger	IN	46530-8598	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		250.00
Rad	e of Employer iology, Inc		c Radiologist	
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBT	DTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 101 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any personess of any political committee to	
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Grantham			Date of Receipt
Mailing Address 50591 Glenshire Ct			03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39276934
Granger	IN	46530-4978	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology, Inc.	Occupation Diagnosti	c Radiologist	
Receipt For:		Year-to-Date ▼	7
Primary General Other (specify) ▼	33.132.0	250.00	
Full Name (Last, First, Middle Initial) Dr. Michael Hall			Date of Receipt
Mailing Address 1260 Garland Rd			03 18 2011
City	State	Zip Code	Transaction ID: 39276936
South Bend	IN	46614-2103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology, Inc.	Occupation Diagnosti	c Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Alphonse Harding			Date of Receipt
Mailing Address 17120 Wheatridge C	Ct		03 18 2011
City	State	Zip Code	Transaction ID: 39276937
Granger	IN	46530-9769	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology, Inc.	Occupation Diagnosti	c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional))		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 101 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association	e name and addr	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael R. Holt Mailing Address 16980 Stonegate Cour City Granger FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc.	State IN C Occupation Diagnostic	Zip Code 46530-6947	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 8 2 0 1 1 Transaction ID: 39276938 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Allison Lamont Mailing Address Radiology Inc PO Box 1258 City South Bend FEC ID number of contributing federal political committee.	State IN	Zip Code 46624-1258	Date of Receipt M M M
Name of Employer Radiology, Inc Receipt For: Primary General Other (specify) ▼	, ' <u> </u>	c Radiologist Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Christine O'Malley Mailing Address 14264 Avery Pt			Date of Receipt 0 3
City Granger FEC ID number of contributing	State IN	Zip Code 46530-4844	Transaction ID: 39276940 Amount of Each Receipt this Period
federal political committee. Name of Employer Self-Employed	Occupation Diagnostic	e Radiologist	250.00
Receipt For: Primary General Other (specify)	, ' 	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 101 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Russell Midkiff		Date of Receipt
Mailing Address 51930 Quail Valley	Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39276942
Granger	IN 46530-8875	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Pedro Miro		Date of Receipt
Mailing Address 50957 Park Ridge C	Ct Ct	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39276943
Granger	IN 46530-4986	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Eldon W. Olson		Date of Receipt
Mailing Address 2006 Long Knife Co	urt	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39276944
Louisville	KY 40207-1176	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 101 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to a sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mark Ormson Mailing Address 51194 Midlothian (Ct .	Date of Receipt
City Granger	State Zip Code IN 46530-9253	0 3 1 8 2 0 1 1 Transaction ID: 39276945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc.	Occupation	250.00
Receipt For: Primary General Other (specify)	Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Samir Patel Mailing Address 14208 Avery Point		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	0 3 1 8 2 0 1 1 Transaction ID: 39276946
Granger	IN 46530-4844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Karl Schultz		Date of Receipt
Mailing Address 620 W Edison Ste	110	03 18 2011
City	State Zip Code	Transaction ID: 39276947
Mishawaka FEC ID number of contributing federal political committee.	IN 46545-2784	Amount of Each Receipt this Period 250.00
Name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 101 (check only one) X
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associates the commercial purposes and S or for the commercial purposes.	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Thomas Seiffert			Date of Receipt
	Mailing Address 620 W Edison Rd Ste		7:- Od.	03 / 18 / 2011
	City Mishawaka	State IN	Zip Code 46545-2784	Transaction ID: 39276948 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10101011	250.00
	Name of Employer Radiology, Inc.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	,	e Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) Kevin Michael Small Mailing Address 307 E La Salle Avenue	Apt. 322L		Date of Receipt
				03 18 2011
	City South Bend	State IN	Zip Code	Transaction ID: 39276949
	FEC ID number of contributing federal political committee.	C	46617-4704	Amount of Each Receipt this Period 250.00
	Name of Employer Radiology, Inc.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Katrina Vanderveen			Date of Receipt
	Mailing Address 14635 Wheaton Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 39276950
	Granger FEC ID number of contributing federal political committee.	C	46530-4252	Amount of Each Receipt this Period 250.00
	Name of Employer Radiology Inc.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	,	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin	and Statements may not be sold or used by any persong the name and address of any political committee to ssociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. LeRoy Weaver, JR Mailing Address 21339 Morse Place City Bristol FEC ID number of contributing federal political committee. Name of Employer Radiology Inc. Receipt For: Primary General	State Zip Code IN 46507-9032 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 8 2 0 1 1 Transaction ID: 39276951 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jonathan Weiss Mailing Address 51642 Wexford D City	250.00 T State Zip Code	Date of Receipt M
Granger FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Lonnie Simmons Mailing Address Gundersen/Luther 1900 South Ave Color City La Crosse FEC ID number of contributing		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) General	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.02	
SUBTOTAL of Receipts This Page (optio	nal)	583.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 101 (check only one) X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to	
American College of Radiology Ass Full Name (Last, First, Middle Initial) Dr. Mark Wetherly	ociation Political Action Committee	Date of Receipt
Mailing Address 2074 Kinsmon Dr City	State Zip Code	0 3 2 2 2 2 2 0 1 1 Transaction ID: 39292253
Marietta FEC ID number of contributing federal political committee.	GA 30062-8135	Amount of Each Receipt this Period 500.00
Name of Employer Quantum Radiology Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. Scott Miller Mailing Address X-Ray Physicians of 150 W Washington	f Shelbyville	Date of Receipt 0 3 2 2 2 2 0 1 1
City	State Zip Code	Transaction ID: 39292256
Shelbyville FEC ID number of contributing federal political committee.	IN 46176-1236	Amount of Each Receipt this Period 250.00
Name of Employer X-Ray Physicians of Shelb- yville Receipt For:	Occupation Diagnostic Radiologist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. David Steinberg	l	Date of Receipt
Mailing Address 7301 Peak Dr Ste 2	00	03 22 2011
City <u>Las Vegas</u>	State Zip Code NV 89128-9308	Transaction ID: 39292257
FEC ID number of contributing federal political committee.	C 89126-9306	Amount of Each Receipt this Period 500.00
Name of Employer Steinberg Diagnostic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and for commercial purposes, other than using t	Statements may not be sold or used by any pone name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Ying Wang		Date of Receipt
-	Mailing Address 728 134th St SW Ste	9 120	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 39294088
	Everett	WA 98204-5322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Dr. Anne P. Dunne		Date of Receipt
	Mailing Address 102 Andrews Ct		03 22 7 2011
	City	State Zip Code	Transaction ID: 39294090
	Lewisburg	PA 17837-6510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Geisinger Medical Center	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. James Thrall		Date of Receipt
	Mailing Address Massachusetts Gene 55 Fruit St	eral Hospital	03 22 2011
	City	State Zip Code	Transaction ID: 39294092
	Boston	MA 02114-2620	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2500.00
	Name of Employer Massachusetts General Hos- pital	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	2500.00	
Г			4000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(Crieck only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assor	e name and address of any political commi	r person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Tallman Mailing Address 1054 Greymont Cir N	W	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Marietta	State Zip Code GA 30064-1330	Transaction ID: 39294093 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Quantum Radiology Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Dr. Seth Rosenthal Mailing Address Rad Assoc of Sacran	nento	Date of Receipt
1500 Expo Pkwy City	State Zip Code	0 3 2 2 2 0 1 1 Transaction ID: 39294094
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Oncologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	0
Full Name (Last, First, Middle Initial) Dr. Josie Alpers		Date of Receipt
Mailing Address 6609 E Split Rock Cir	•	03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39400862
Sioux Falls FEC ID number of contributing federal political committee.	SD 57110-1306	Amount of Each Receipt this Period 327.86
Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	6
		1727.86

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 101 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and the commercial purposes.	Statements may not be sold or used by any pers he name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joseph Baka Mailing Address 5104 S Daffodil Cir City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical X-Ray Center Receipt For: Primary General Other (specify)	State Zip Code SD 57108-2302 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86	Date of Receipt M M
Full Name (Last, First, Middle Initial) Dr. David Bean Mailing Address 2301 W Barrington C City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify)	Cir State Zip Code SD 57108-5024 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39400864 Amount of Each Receipt this Period 327.86
Full Name (Last, First, Middle Initial) Dr. Matthew Casey Mailing Address 209 W Saint Andrew City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify)	State Zip Code SD 57108-2952 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 327.86	Date of Receipt M M M / D D / Y Y Y Y Y O 3 2 3 2 0 1 1 Transaction ID: 39400865 Amount of Each Receipt this Period 327.86
SUBTOTAL of Receipts This Page (optional)		983.58

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 101 (check only one) X
Any information copied from such Report or for commercial purposes, other than u	rts and Statements may not be sold or used by any persousing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Sabina Choudhry		Date of Receipt
Mailing Address Medical X-Ray 1417 S Minneso		03 23 2011
City <u>Sioux Falls</u>	State Zip Code SD 57105-1783	Transaction ID: 39400866
FEC ID number of contributing federal political committee.	SD 57105-1783	Amount of Each Receipt this Period 327.86
Name of Employer Med X-Ray Center, P.C.	Occupation Radiation Oncologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Thomas Cink		Date of Receipt
Mailing Address Medical X-Ray 1417 S Minneso	ota Ave	03 23 2011
City	State Zip Code	Transaction ID: 39400868
Sioux Falls FEC ID number of contributing	SD 57105-1783	Amount of Each Receipt this Period
federal political committee.	C	327.86
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Daniel Crosby		Date of Receipt
Mailing Address 3001 S Bishop	Jones PI	03 23 2011
City	State Zip Code	Transaction ID: 39400869
Sioux Falls	SD 57103-4664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	327.86
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	327.86	
SURTOTAL of Receipts This Page (an	itional)	983.58
	number only)	

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 101 (check only one) X
or for comme	on copied from such Reports and S rcial purposes, other than using the COMMITTEE (In Full) n College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Dr. Edward Mailing Ad City Sioux Fa FEC ID noted federal positions.	umber of contributing litical committee. Employer ay Center, P.C.	,	Zip Code 57108-5001 on tic Radiologist e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 3 23 2011 Transaction ID: 39400870 Amount of Each Receipt this Period 327.86
Oth	er (specify) (Last, First, Middle Initial) Duffek		327.86	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of I Med X-Ra Receipt F	umber of contributing litical committee. Employer ay Center, P.C. or: nary General	, '	Zip Code 57108-6405 In tic Radiologist Year-to-Date ▼ 327.86	Transaction ID: 39400871 Amount of Each Receipt this Period 327.86
Full Name Dr. Kirster Mailing Ac City Sioux Fa	ddress Medical X-Ray Center 1417 S Minnesota Ave	State SD	Zip Code 57105-1783	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of I Medical X Receipt F	Employer -Ray Center or:	, ' 	n tic Radiologist e Year-to-Date ▼	327.86
SUBTOTAL	of Receipts This Page (optional))	983.58

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 101 (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Gary Famestad Mailing Address Medical X-Ray Center 1417 S Minnesota Ave City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify)	State SD C Occupation Diagnost	Zip Code 57105-1715 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Charles Flohr Mailing Address 723 E Greenbrier PI City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical X-Ray Center Receipt For: Primary General Other (specify)	, '	Zip Code 57108-6421 n ic Radiologist Year-to-Date ▼ 327.86	Date of Receipt M M M / D D / Y Y Y Y Y 2 3 2 0 1 1 Transaction ID: 39401568 Amount of Each Receipt this Period 327.86
Full Name (Last, First, Middle Initial) Dr. Thomas Free Mailing Address 3551 S Spencer Blvd City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical X-Ray Center Receipt For: Primary General Other (specify)		Zip Code 57103-4654 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y O 3 2 3 2 0 1 1 Transaction ID: 39401569 Amount of Each Receipt this Period 327.86
SUBTOTAL of Receipts This Page (optional)			983.58

commercial purposes, other than using to the commercial to the commercial purposes. The commercial purposes are commercially of the commercial purposes. The commercial purposes are commercial purposes, other than using the commercial purposes. The commercial purposes are commercial purposes, other than using the commercial purposes. The commercial purposes are commercial purposes. The commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes are commercial purposes. The commercial purposes are commercial purposes are commercial purposes are commercial purposes. The commercial pu	Statements may not be sold or used by any personal he name and address of any political committee to ociation Political Action Committee State Zip Code WY 82414-9234 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 327.86	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
merican College of Radiology Associal Name (Last, First, Middle Initial) . Michael Grant ailing Address 151 Adams Ln ty ody CC ID number of contributing deral political committee. ame of Employer edical X-Ray Center eceipt For: Primary General Other (specify) Il Name (Last, First, Middle Initial)	State Zip Code WY 82414-9234 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 327.86	Transaction ID: 39401570 Amount of Each Receipt this Period
Michael Grant ailing Address 151 Adams Ln ty ody CC ID number of contributing deral political committee. ame of Employer edical X-Ray Center acceipt For: Primary General Other (specify) Il Name (Last, First, Middle Initial)	WY 82414-9234 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86	Transaction ID: 39401570 Amount of Each Receipt this Period
ty ody CC ID number of contributing deral political committee. The arms of Employer edical X-Ray Center edical X-Ray Center The accept For: Other (specify) Il Name (Last, First, Middle Initial)	WY 82414-9234 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86	Transaction ID: 39401570 Amount of Each Receipt this Period
cody EC ID number of contributing deral political committee. Imme of Employer edical X-Ray Center Except For: Primary General Other (specify) Il Name (Last, First, Middle Initial)	WY 82414-9234 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86	Amount of Each Receipt this Period
C ID number of contributing deral political committee. The primary and the contributing deral political committee. The primary and the contributing deral political committee. The primary and the contributing deral and the contribution of the c	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86	
deral political committee. ame of Employer edical X-Ray Center acceipt For: Primary General Other (specify) Il Name (Last, First, Middle Initial)	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86	327.86
eceipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 327.86]
Primary General Other (specify) ▼ Il Name (Last, First, Middle Initial)	327.86	
Other (specify) ▼ Il Name (Last, First, Middle Initial)		
. Christopher Gregory		Date of Receipt
ailing Address 5700 S Lazy Ridge F	P	03 / 23 / Y Y Y Y Y Y
ty	State Zip Code	Transaction ID: 39401571
oux Falls	SD 57108-5235	Amount of Each Receipt this Period
EC ID number of contributing deral political committee.	C	327.86
ame of Employer ed X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
eceipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	327.86	
II Name (Last, First, Middle Initial) . Matthew Helgeson		Date of Receipt
1417 S Minnesota A	ve	03 / 23 / 2011
ty	·	Transaction ID: 39401577
	SD 57105-1715	Amount of Each Receipt this Period
EC ID number of contributing deral political committee.	C	327.86
ame of Employer edical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
eceipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	327.86	
TOTAL of Receipts This Page (optional)		983.58
	deral political committee. Ime of Employer ed X-Ray Center, P.C. Inceipt For: Primary General Other (specify) ▼ Il Name (Last, First, Middle Initial) Matthew Helgeson Indiging Address Medical Xray Center 1417 S Minnesota Arty Oux Falls Inceipt For: Inceipt	C ID number of contributing deral political committee. Ime of Employer ad X-Ray Center, P.C. Cocipt For: Primary Other (specify) IN Name (Last, First, Middle Initial) Matthew Helgeson Address Medical Xray Center PC 1417 S Minnesota Ave Sy Oux Falls C ID number of contributing deral political committee. C C C C C C C C C C C C C C C C C C C

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 101 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset	the name and add	lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Kihne Mailing Address Medical X-Bay Cent			Date of Receipt
Mailing Address Medical X-Ray Cent 1417 S Minnesota A City		Zip Code	0 3 2 3 2 0 1 1 Transaction ID: 39401578
Sioux Falls	SD	57105-1715	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.86
Name of Employer Medical X-Ray Center	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Jonah Luzier Mailing Address 1100 Goldthread Cir			Date of Receipt
Mailing Address 1100 Goldtillead Cil	ı		03 23 2011
City	State	Zip Code	Transaction ID: 39401579
Sioux Falls	SD	57108-2824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.86
Name of Employer Medical X-Ray Center, P.C.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Steven McGraw	l		Date of Receipt
Mailing Address 27209 Fountain Cir			03 23 2011
City	State	Zip Code	Transaction ID: 39401581
<u>Harrisburg</u>	SD	57032-8122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.86
Name of Employer Med X-Ray Center, P.C.	- ' '	Oncologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 327.86	
SUBTOTAL of Receipts This Page (optional	`		983.58

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and State or for commercial purposes, other than using the report of NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	American College of Radiology Associa	tion Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Patrick Nelson			Date of Receipt
	Mailing Address Medical X-Ray Center F 1417 S Minnesota Ave	PC		03 23 7 2011
	City Sioux Falls	State SD	Zip Code 57105-1783	Transaction ID: 39401582
	FEC ID number of contributing federal political committee.	C	37103-1763	Amount of Each Receipt this Period 327.86
	Name of Employer Medical X-Ray Center PC	Occupatio	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 327.86	
- В.	Full Name (Last, First, Middle Initial) Dr. Matthew Pardy			Date of Receipt
	Mailing Address 1417 S Minnesota Ave			03 23 2011
	City	State	Zip Code	Transaction ID: 39401583
	Sioux Falls FEC ID number of contributing federal political committee.	SD	57105-1715	Amount of Each Receipt this Period 327.86
	Name of Employer Med X-Ray Center, P.C.	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 327.86	
- C.	Full Name (Last, First, Middle Initial) Dr. Brad Paulson			Date of Receipt
	Mailing Address Medical X-Ray Center 1417 S Minnesota Ave			03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sioux Falls	State SD	Zip Code 57105-1783	Transaction ID: 39401584 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,100	327.86
	Name of Employer Medical X-Ray Center	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 327.86	
	SUBTOTAL of Receipts This Page (optional)			983.58
	TOTAL This Period (last page this line number of	ınlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. J Joshua Plorde		Date of Receipt
Mailing Address 1901 S Main Ave		03 23 2011
City	State Zip Code	Transaction ID: 39401585
Sioux Falls	SD 57105-2931	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	327.86
Name of Employer Mayo Clinic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Daryl Rife		Date of Receipt
Mailing Address 5705 S Shadow Ridg	ge Ave	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39401586
Sioux Falls	SD 57108-2006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	327.86
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth		Date of Receipt
Mailing Address 2005 S Pendar Lane		03 23 2011
City	State Zip Code	Transaction ID: 39401593
Sioux Falls	SD 57105-3022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	327.86
Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
SUBTOTAL of Receipts This Page (optional)		983.58

	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Ar or	y information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any per le name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Randal Welter		Date of Receipt
	Mailing Address 1004 E Tomar Rd		03 / 23 / 2011
	City	State Zip Code	Transaction ID: 39401596
	Sioux Falls FEC ID number of contributing	SD 57105-7010	Amount of Each Receipt this Period 327.86
	federal political committee. Name of Employer	Occupation	
	Name of Employer Medical X-Ray Center	Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
_	Full Name (Last, First, Middle Initial) Dr. Terry Yeager		Date of Receipt
	Mailing Address 2800 S Old Orchard	Cir	03 23 2011
	City	State Zip Code	Transaction ID: 39401609
	Sioux Falls	SD 57103-4339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	327.86
	Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
	Full Name (Last, First, Middle Initial) Dr. Khalil Yousef		Date of Receipt
	Mailing Address 5120 S Twinleaf Dr		03 23 2011
	City	State Zip Code	Transaction ID: 39401610
	Sioux Falls	SD 57108-2843	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	327.86
	Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	327.86	
	UBTOTAL of Receipts This Page (optional)		983.58

commercial purposes, other than using ME OF COMMITTEE (In Full)		Date of Receipt Date of Receipt Transaction ID: 39401681 Amount of Each Receipt this Period 1500.00 Date of Receipt
nerican College of Radiology Associated Residual Interval Interva	aging St Ste 101 State Zip Code WY 82601-2951 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Transaction ID: 39401681 Amount of Each Receipt this Period 1500.00
Geoffrey Smith ling Address	St Ste 101 State Zip Code WY 82601-2951 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Transaction ID: 39401681 Amount of Each Receipt this Period 1500.00
A19 S Washington S Sper C ID number of contributing eral political committee. The of Employer sper Medical Imaging seipt For: Primary General Other (specify) Name (Last, First, Middle Initial) Joseph McGinley	St Ste 101 State Zip Code WY 82601-2951 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Transaction ID: 39401681 Amount of Each Receipt this Period 1500.00
Sper C ID number of contributing eral political committee. me of Employer sper Medical Imaging ceipt For: Primary General Other (specify)	State Zip Code WY 82601-2951 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1500.00	Amount of Each Receipt this Period 1500.00
C ID number of contributing eral political committee. me of Employer sper Medical Imaging ceipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1500.00	1500.00
eral political committee. me of Employer sper Medical Imaging ceipt For: Primary General Other (specify) Name (Last, First, Middle Initial) Joseph McGinley	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1500.00	
ceipt For: Primary General Other (specify)	Diagnostic Radiologist Aggregate Year-to-Date ▼ 1500.00	Date of Receipt
Primary General Other (specify) ▼ Name (Last, First, Middle Initial) Joseph McGinley	1500.00	Date of Receipt
Other (specify) Name (Last, First, Middle Initial) Joseph McGinley		Date of Receipt
Joseph McGinley		Date of Receipt
ling Address 5910 S Cedar St		─ ┪
ang rate of or or order of		03 / 23 / 2011
1	State Zip Code	Transaction ID: 39401682
sper	WY 82601-6244	Amount of Each Receipt this Period
C ID number of contributing eral political committee.	С	500.00
me of Employer sper Medical Imaging	Occupation Diagnostic Radiologist	
ceipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	500.00	
Name (Last, First, Middle Initial) Frederick Cubin		Date of Receipt
ling Address 2435 Fairdale Ave		03 / 23 / 2011
1	State Zip Code	Transaction ID: 39401683
sper	WY 82601-5195	Amount of Each Receipt this Period
C ID number of contributing eral political committee.	C	250.00
me of Employer sper Medical Imaging	Occupation Diagnostic Radiologist	
ceipt For:	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
		2250.00
F 1 2 2 2 3 3 3 3 3 3 3	Name (Last, First, Middle Initial) Frederick Cubin ing Address 2435 Fairdale Ave sper C ID number of contributing oral political committee. ne of Employer per Medical Imaging eipt For: Primary General	Name (Last, First, Middle Initial) Frederick Cubin ing Address 2435 Fairdale Ave State Zip Code WY 82601-5195 C ID number of contributing eral political committee. De of Employer per Medical Imaging eipt For: Primary General Aggregate Year-to-Date

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sched for each category of Detailed Summary P	the (check diffy dife)
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by a name and address of any political con	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associately	iation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Michele Corsini		Date of Receipt
	Mailing Address 5800 S Prairie View C		03 / 23 / 2011
	City Sioux Falls	State Zip Code SD 57108-2002	Transaction ID: 39401763
	FEC ID number of contributing federal political committee.	SD 57108-2002	Amount of Each Receipt this Period 327.86
	Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	7.86
	Full Name (Last, First, Middle Initial) Dr. Cheri Canon		Date of Receipt
	Mailing Address 1533 Woodridge PI		03 23 2011
	City	State Zip Code	Transaction ID: 39406735
	Birmingham	AL 35216-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer U of Alabama School of Med	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	0.00
	Full Name (Last, First, Middle Initial) Dr. Michael Matyas		Date of Receipt
	Mailing Address 7138 Currin Dr		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code	Transaction ID: 39406737
	Dallas	TX 75230-3646	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Radiology Consultants of North Dallas	Occupation Diagnostic Radiologist	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	500	0.00
	SUBTOTAL of Receipts This Page (optional) .		1827.86

Any information copied from such Reports and State or for commercial purposes, other than using the national purposes. Full Name (Last, First, Middle Initial) Dr. Peter Giuliano Mailing Address 27 Amargosa City Irvine FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Michael Chaliff Mailing Address 195 Grogans Lake Point	me and address of any political committee to	Date of Receipt Date of Receipt
Dr. Peter Giuliano Mailing Address 27 Amargosa City Irvine FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Michael Chaliff	CA 92602-2455 C Occupation Diagnostic Radiologist	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Michael Chaliff	Occupation Diagnostic Radiologist	_
Dr. Michael Chaliff	250.00	
		Date of Receipt 0 3 3 1 2 0 1 1
City Atlanta	State Zip Code GA 30350-3118	Transaction ID: 39458556 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Diagnostic Imagina Specia	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Richard Satre		Date of Receipt
Mailing Address 728 134th St SW Ste 120		03 31 2011
City Everett	State Zip Code WA 98204-5322	Transaction ID: 39458559 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mark LeQuire Mailing Address 2055 Myrtlewood D City Montgomery	r State Zip Code AL 36111-1003	Date of Receipt M M M
FEC ID number of contributing federal political committee. Name of Employer Montgomery Radiology Associates Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Dr. Curtis Poor Mailing Address 2415 Eagle Cir City Bettendorf FEC ID number of contributing federal political committee. Name of Employer Radiology Group PC SC	State Zip Code IA 52722-6202 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Sean Theisen Mailing Address 1346 Whispering M	aples Ct	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Ann Arbor FEC ID number of contributing federal political committee.	State Zip Code MI 48108-2492 C	Transaction ID: 39458564 Amount of Each Receipt this Period 500.00
Name of Employer Huron Valley Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l) >	1000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 101 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\angle	Full Name (Last, First, Middle Initial)		al Action Committee	
۱.	Dr. Jeffrey Jaindl Mailing Address 939 Quarter Round Ro	oad		Date of Receipt 0 3 3 1 2 0 1 1
	City	State	Zip Code	Transaction ID: 39458575
	Pacolet	SC	29372-3516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Greenville Radiology, P.A.	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) Dr. James Webb			Date of Receipt
	Mailing Address 9132 E 101st PI			03 / 31 / 2011
	City	State	Zip Code	Transaction ID: 39458578
	Tulsa	OK	74133-6912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Univ of Oklahoma Health Sci Ctr	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) Dr. Jugesh Cheema			Date of Receipt
	Mailing Address 2466 Oak Bend Pl			03 31 2011
	City	State	Zip Code	Transaction ID: 39458580
	Newburgh	IN	47630-8053	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Medical Center of Delaware	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
	UBTOTAL of Receipts This Page (optional)	1		425.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using the	Statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. William Ray		Date of Receipt
Mailing Address 1907 Redbud Lane City	State Zip Code	03 31 2011
Bloomington	IL 61704-2773	Transaction ID: 39458583 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Bloomington Radiology SC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. James Rawson		Date of Receipt
Mailing Address Medical College of G 1120 15th St BA1414	<u>. </u>	03 / 03 / 2011
City	State Zip Code	Transaction ID: 39458589
Augusta FEC ID number of contributing federal political committee.	GA 30912-0006	Amount of Each Receipt this Period 83.34
Name of Employer Medical College of Georgia	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	
Full Name (Last, First, Middle Initial) Dr. Alfred Mansour, JR		Date of Receipt
Mailing Address Central LA Imaging I 3704 North Blvd Ste		03 31 2011
City	State Zip Code LA 71301-3606	Transaction ID: 39458596
Alexandria FEC ID number of contributing federal political committee.	LA 71301-3606	Amount of Each Receipt this Period 83.34
Name of Employer Central LA Imaging Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	
	-	266.68

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 101 (check only one) X
or for commercial purpos NAME OF COMMITT	es, other than using the name and	d address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First		milical Action Committee	
Dr. Mark Wittry	,		Date of Receipt
	525 Concord School Rd		03 31 2011
City Saint Louis	Stat MO	·	Transaction ID: 39458597 Amount of Each Receipt this Period
FEC ID number of confederal political commi	ntributing	00120 1202	85.00
Name of Employer West County Radiolog Group, Inc.	gical Occup Card	oation iac Radiologist	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 255.00	
Full Name (Last, First Dr. Eric Sax	,		Date of Receipt
Mailing Address 9 (Old Sudbury Rd		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	Stat	e Zip Code	Transaction ID: 39458599
Lincoln	MA	01773-4807	Amount of Each Receipt this Period
FEC ID number of confederal political commi			83.34
Name of Employer The Imaging Institute	Occu _l Diagi	oation nostic Radiologist	
Receipt For:		egate Year-to-Date ▼	
Other (specify)	General	250.02	
Full Name (Last, First Dr. Amy Kirby	, Middle Initial)		Date of Receipt
Mailing Address 52	09 Pulchella Drive		03 31 YYYY 2011
City	Stat	!	Transaction ID: 39458601
Oklahoma City	OK	73142-6811	Amount of Each Receipt this Period
FEC ID number of confederal political commi			200.00
Name of Employer Eagle Eye Imaging		ology Resident	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 750.00]
CURTOTAL of Possints	This Page (entional)		368.34

SCHEDULE A (FEC Form 3X)	Harana and Adams (Adams)	FOR LINE NUMBER: PAGE 77 / 101
· · · · · · · · · · · · · · · · · · ·	Use separate schedule(s) for each category of the	(check only one)
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American College of Radiology Associ	ation Political Action Committee	
/		
Full Name (Last, First, Middle Initial) Dr. Martin Schwartz		Date of Receipt
Mailing Address Radiology Associates of 2090 Columbiana Rd S		03 31 2011
City	State Zip Code	Transaction ID: 39458607
Birmingham	AL 35216-2152	Amount of Each Receipt this Period
FEC ID number of contributing		100.00
federal political committee.	C	100.00
Name of Employer Radiology Associates of	Occupation	
Radiology Associates of Birmingham, PC	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	300.00	7
Other (specify)	300.00	

SUBTOTAL of Receipts This Page (optional)	•	100.00
TOTAL This Period (last page this line number only)	•	96978.66

		Use separate schedule(s)	FOR LINE NUMBER: PAGE /8 / 101 (check only one)
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29
	y Information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) American College of Radiology Association	and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee
	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee Mailing Address 425 Second Street North		Transaction ID: 38779741 Date of Disbursement
	City Washington	State Zip Code DC 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name National Republican Senatorial Committee	Cate	5000.00 011 legory/ type
_	Senate President State: District:	ment For: Primary General Other (specify) ▼	
•	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee Mailing Address 425 Second Street North		Transaction ID: 38779742 Date of Disbursement O 3 M / D 1 5 / Y 2 0 1 1
	Washington Purpose of Disbursement Candidate Name	Cate	Amount of Each Disbursement this Period 5000.00
	National Republican Senatorial Committee Office Sought: House Senate President State: District:	ment For: Primary General Other (specify) ▼	уре
	Full Name (Last, First, Middle Initial) Davis For Congress/Friends Of Davis		Transaction ID: 38783699 Date of Disbursement
	Mailing Address 5956 W. Race Avenue		03 03 2011
	Chicago	State Zip Code IL 60644	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Candidate Name Rep. Danny K. Davis	Cate	011 legory/ type
	X	ment For: 2012 Primary General Other (specify)	
Г			12500.00

SCHEDOLE B (I LC I OHII 5X)	Use separate schedule(s)		Check onl				L		E /9/	101
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	\vdash	23 28b	2 2	4 8c	25 29	
Any Information copied from such Reports and Sta or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)										5
American College of Radiology Associa	tion Political Action Comm	ittee								
Full Name (Last, First, Middle Initial) Blue Dog Political Action Committee				Date		sburse				V
Mailing Address 6849 Old Dominion D Suite 222				0 3			1 /		ž 0 1 ·	
City McLean	State Zip Code VA 22101			Amou	int of	Each	Disbu		ent this 1	-
Purpose of Disbursement Candidate Name			11 egory/		•				500.00	,
Blue Dog Political Action Committee	rsement For:		ype							
Senate President State: District:	Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial)				Trans	actio	on ID:	387	78403	32	
Volunteers For Shimkus				Date		sburse	ement		ž 0 1 ·	Y
Mailing Address PO Box 5458				0 3		Ų	2	<u></u>	201	_
City Springfield	State Zip Code IL 62705			Amou	int of	Each	Disbu		ent this	
Purpose of Disbursement Candidate Name			11 egory/						00.00	J
Rep. John M. Shimkus			ype							
Office Sought: X House Senate President State: IL District: 19	x Primary General Other (specify)									
Full Name (Last, First, Middle Initial) Pallone For Congress				Trans Date	of Dis	sburse	ement	78520		V/
Mailing Address PO Box 3176				0 3	M /	0	2 /	Ľ.	ž 0 1 ·	1 1
City Long Branch	State Zip Code NJ 07740			Amou	ınt of	Each	Disbu	-	ent this	
Purpose of Disbursement Candidate Name		1	11					2	00.00	J
Rep. Frank Pallone, Jr.			egory/ ype							
Senate President	rsement For: 2012 X Primary General Other (specify) ▼									
State: NJ District: 06					_					

ITELLIZED DIODURATION	Use separate schedule(s	s) FC	neck onl	y one)						101
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	—	23 28b	24		25 29	П
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) American College of Radiology Associat	me and address of any politica	al commit								<u></u>
/	on Political Action Comm	iillee			_					
Full Name (Last, First, Middle Initial) Gingrey For Congress Mailing Address PO Box U				Trans Date		burse			5 2 0 1 1	Y
City Marietta	State Zip Code GA 30060			Amou	nt of	Each	Disbu	rseme	nt this f	Perioc
Purpose of Disbursement		01		L.	•			2	00.00)
Candidate Name Rep. Phil Gingrey, M.D.		Categ Typ								
Office Sought: X House Senate President State: GA District: 11	sement For: 2012 X Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee				Trans				8547	2	
Mailing Address PO Box 87				0 3	M /	^D 0	9 /	Y	ž 0 1 1	I
City Uwchland	State Zip Code PA 19480			Amou	nt of	Each	Disbu		nt this f	
Purpose of Disbursement		01		L.		•		20	00.00)
Candidate Name Rep. James W. Gerlach		Categ Typ	•							
Senate President	sement For: 2012 X Primary General Other (specify)									
State: PA District: 06 Full Name (Last, First, Middle Initial)				Trans	antin	n ID:	207	9602	6	
Guthrie For Congress				Date						V
Mailing Address PO Box 9639				0 3			1		ž 0 1 1	
City Bowling Green	State Zip Code KY 42102			Amou	nt of	Each	Disbu		nt this I	
Purpose of Disbursement		01	1	L.		•		20	00.00)
Candidate Name Rep. Brett Guthrie		Categ Typ								
Senate President	sement For: 2012 X Primary General Other (specify)	1								
State: KY District: 02										
SUBTOTAL of Disbursements This Page (optional			•					60	00.00)

	CHEDOLE B (FEC F	-	Use sepa	arate schedule(s)		NUMBER: PAGE 81 / 10
ΙT	EMIZED DISBURSE	MENTS	for each	category of the Summary Page	(check onl	22 X 23 24 25 C
An	y Information copied from such	Reports and Sta	tements may n	ot be sold or used	by any person	28a 28b 28c 29 for the purpose of soliciting contributions
						olicit contributions from such committee
\rangle	NAME OF COMMITTEE (In F American College of Radi	,	tion Political	Action Commi	ttee	
	Full Name (Last, First, Middle GOP Generation Y Fund	nitial)				Transaction ID: 38787348 Date of Disbursement
	Mailing Address PO BOX	(9055				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & O & 1 & 1 \end{smallmatrix} $
	City Peoria		State IL	Zip Code 61612		Amount of Each Disbursement this Per
	Purpose of Disbursement				011	5000.00
	Candidate Name GOP Generation Y Fund	l Diah			Category/ Type	
	Office Sought: House Senate Preside State: District:		Primary Other (spe	General ecify) ▼		
	State: District: Full Name (Last, First, Middle	nitial)				Transaction ID: 38789399
	Voice for Freedom					Date of Disbursement
	Mailing Address 2451 Cu	mberland Par	kway Suite 3	326		03 / 11 / 2011
	City Atlanta		State GA	Zip Code 30339		Amount of Each Disbursement this Per
	Purpose of Disbursement				011	2500.00
	Candidate Name Voice for Freedom				Category/ Type	
	Office Sought: House Senate Preside		Primary Other (spe	General ecify) ▼		
	State: District: Full Name (Last, First, Middle	nitial)				Transaction ID: 39073164
	Lee Terry For Congress					Date of Disbursement
	Mailing Address PO Box	540098				03 7 01 7 2011
	City Omaha		State NE	Zip Code 68154		Amount of Each Disbursement this Per
	Purpose of Disbursement				011	1000.00
	Candidate Name Rep. Lee Terry				Category/ Type	
	Office Sought: X House Senate Preside	nt	x Primary Other (spe	2012 General		
	State: NE District: 02	<u> </u>				
						8500.00

ITE	HEDULE B (LEC LOI	· 1	Use separa	ate schedule(s)		NUMBER: PAGE 82 / 101
	EMIZED DISBURSEM		for each ca	tegory of the ummary Page	(check onl	y one) 22 X 23 24 25 28a 28b 28c 29 1
					by any person	for the purpose of soliciting contributions solicit contributions from such committee
	NAME OF COMMITTEE (In Full) American College of Radiolo					violi contributions from such committee
	Full Name (Last, First, Middle Initi Berg For Congress	al)				Transaction ID: 39073165 Date of Disbursement
Ī	Mailing Address PO Box 93	94				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & 1 \end{bmatrix}$
_	City Fargo	Sta NE		Zip Code 58106		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name				011 Category/	2000.00
	Mr. Richard Berg Office Sought: X House	Disburseme	ent For	2012	Type	
	Senate President State: ND District: 01	X Pi	rimary ther (speci	General		
ı	Full Name (Last, First, Middle Initi Heller For Congress	al)				Transaction ID: 39073166 Date of Disbursement
Ī	Mailing Address PO Box 75	0580				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
	City Las Vegas	Sta N\		Zip Code 89136		Amount of Each Disbursement this Period
_	Purpose of Disbursement				011	1000.00
	Candidate Name Mr. Dean Heller				Category/ Type	
(Office Sought: X House Senate President		ent For: rimary ther (speci	2012 General fy) ▼		
ç	State: NV District: 02					
ı	State: NV District: 02 Full Name (Last, First, Middle Initi Jim Renacci For Congress	al)				Transaction ID: 39073167 Date of Disbursement
 -	Full Name (Last, First, Middle Initi	, 				
- - - -	Full Name (Last, First, Middle Initi Jim Renacci For Congress	, 		Zip Code 44281		Date of Disbursement O 3
 	Full Name (Last, First, Middle Initi- Jim Renacci For Congress Mailing Address 150 Smoke City Wadsworth Purpose of Disbursement	erise Drive			011	Date of Disbursement O 3
	Full Name (Last, First, Middle Initi- Jim Renacci For Congress Mailing Address 150 Smoke City Wadsworth Purpose of Disbursement Candidate Name Mr. James Renacci	erise Drive Sta Ol	H	44281	011 Category/ Type	Date of Disbursement O 3
	Full Name (Last, First, Middle Initi. Jim Renacci For Congress Mailing Address 150 Smoke City Wadsworth Purpose of Disbursement Candidate Name	Sta Of Disburseme	H	2012 General	Category/	Date of Disbursement O 3

IT	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		NUMBER: PAGE 83 / 101
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	y one) 22 X 23 24 25 28a 28b 28c 29 3
	/ Information copied from such Reports and State			d by any person f	or the purpose of soliciting contributions
or i	or commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and addre	ss of any political	committee to so	ilcit contributions from such committee
\rangle	American College of Radiology Association	n Political	Action Commi	ttee	
	Full Name (Last, First, Middle Initial) Andy Harris For Congress				Transaction ID: 39073168 Date of Disbursement
	Mailing Address PO Box 1527				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix} $
	City Annapolis	State MD	Zip Code 21404		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name			011	2500.00
	Mr. Andrew Harris			Category/ Type	
	Senate President	ement For: Primary Other (spe	2012 General		
	State: MD District: 01				
	Full Name (Last, First, Middle Initial) Diane Black For Congress				Transaction ID: 39073169 Date of Disbursement
	Mailing Address 819 Plantation Blvd				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$
	City Gallatin	State TN	Zip Code 37066		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	1500.00
	Candidate Name Ms. Diane Black			Category/ Type	
		ement For: Primary Other (spe	2012 General ecify) ▼		
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	State: TN District: 06				
	State: TN District: 06 Full Name (Last, First, Middle Initial) Bilirakis For Congress				Transaction ID: 39075935 Date of Disbursement
	Full Name (Last, First, Middle Initial)				
	Full Name (Last, First, Middle Initial) Bilirakis For Congress	State FL	Zip Code 33606		Date of Disbursement M 3 M / D 0 4 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Bilirakis For Congress Mailing Address 610 S. Boulevard City			011	Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Bilirakis For Congress Mailing Address 610 S. Boulevard City Tampa			011 Category/ Type	Date of Disbursement M 3 M / D 4 / Y 2 0 1 1 Amount of Each Disbursement this Period
	Full Name (Last, First, Middle Initial) Bilirakis For Congress Mailing Address 610 S. Boulevard City Tampa Purpose of Disbursement Candidate Name Rep. Gus M. Bilirakis Office Sought: X House Disburs Senate X President		2012 General	Category/	Date of Disbursement M 3 M / D 4 / Y Y Y Y Y Y Amount of Each Disbursement this Period
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•	Full Name (Last, First, Middle Initial) Schakowsky For Congress Mailing Address P.O. Box 5130					Date		sburs			5 2 0 1 1	Y
	City Evanston	State Zip Code IL 60204				Amou	unt of	Each	Disb	urseme	ent this f	Period
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	Candidate Name Rep. Janice D. Schakowsky			ateg Type								
	Senate X President	ement For: 2012 Primary General Other (specify)										
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	Mailing Address 6065 Roswell Rd., #2274	1				0 3	M /	D	8		ž 0 1 1	Y
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	Full Name (Last, First, Middle Initial) Friends of Max Baucus						of Di	sburs	ement			
	Mailing Address Box 586					0 3	M /	^D C	8	Y	ž 0 1 1	
	City	State Zip Code MT 59624				Amou	unt of	Each	Disb		ent this F	
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American College of Radiology Associa	lion Political	ACTION COMMI	llee									
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Mailing Address 607 14th Street, Nw Suite 800						0.3		1	1	. 2	011	
City Washington	State DC	Zip Code 20005				Amo	unt of	Each	Disbur			
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Bucshon For Congress							of Dis	burse				V
Mailing Address PO Box 250						0 3	IVI /	1	^D 4	2	0 1 1	_
City Newburgh	State IN	Zip Code 47629				Amo	unt of	Each	Disbur	semen	t this F	erio
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Candidate Name Mr. Larry Bucshon			Ca	tego Γype	•							
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Full Name (Last, First, Middle Initial) Rogers For Congress							saction of Dis		3907 ement	76118		
Mailing Address PO Box 581 Post Office Box 581						0 ^M 3	M /	1	5 /	^Y 2	0 1 1	Y
City Brighton	State MI	Zip Code 48116				Amo	unt of	Each	Disbur	semen	t this F	erio
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Mailing Address 2875 Towerview Ro	ad Suite 1000				0 3		1	6	. 2	011	
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Pete Sessions For Congress					Date		isburse	ment			Υ
Mailing Address PO Box 823047					0,3	ıVI	1	7 /	· 2	0 1 1	
City Dallas	State Zip Code TX 75382				Amou	ınt o	f Each	Disburse	emen	t this P	erio
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Charles A. Gonzalez Congressional C	ampaign				Date of	of Di	isburse				V
Mailing Address PO Box 12612					0 ^M 3	М	/ 1	7 /	Ž	0 1 1	Y
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	y Information copied from such Reports and Stat or commercial purposes, other than using the na NAME OF COMMITTEE (In Full)											
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	Full Name (Last, First, Middle Initial) Friends Of Carolyn Mccarthy Mailing Address 151 Linden Road					Date	of Di	sburs		07622 t	25 2 0 1	1 Y
	City Mineola	State Zip Code NY 11501				Amou	unt of	Each	Disb		ent this	
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	Rep. Carolyn McCarthy Office Sought: X House Disbute Senate President State: NY District: 04	sement For: 2012 X Primary General Other (specify)	Т	уре								
	Full Name (Last, First, Middle Initial) Friends Of John Barrow					Date		sburs	emen	07622 t		Y
	Mailing Address PO Box 8166					0 3		1	9	L.	ž 0 1	1
	City Savannah	State Zip Code GA 31412				Amou	unt of	Each	Disb		ent this 2500.0	
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	Mailing Address 3069 Conquista Court					0 3	М	^D 1	5	/ L	ž 0 1	1
	City Las Vegas	State Zip Code NV 89121				Amou	unt of	Each	Disb	ursem	ent this	Period
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			PAGE 88 / 101
	Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30
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NAME OF COMMITTEE (In Full) American College of Radiology Associatio	n Political Action Commi	ittee		
Full Name (Last, First, Middle Initial) Berkley For Congress			Transaction ID: 3	ent
Mailing Address 3069 Conquista Court			$\begin{bmatrix} M & M \\ 0 & 3 \end{bmatrix}$	2011
City Las Vegas	State Zip Code NV 89121		Amount of Each Dis	sbursement this Period
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Candidate Name Rep. Shelley Berkley		Category/ Type		
	ement For: 2012 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC)			Transaction ID: 3	
Mailing Address 25 East Main Street Suit	e 200		03 7 7	2011
City Richmond	State Zip Code VA 23219		Amount of Each Dis	sbursement this Period
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Candidate Name Every Republican Is Crucial (ERICPAC)		Category/ Type		
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	,		
Full Name (Last, First, Middle Initial) Braley For Congress			Transaction ID: 3	
Mailing Address PO Box 390			03 7 7	2011
City Waterloo	State Zip Code IA 50704		Amount of Each Dis	sbursement this Period
Purpose of Disbursement		011		5000.00
Candidate Name Rep. Bruce Braley		Category/ Type		
	ement For: 2012 Primary General Other (specify)			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE (check onl	NUMBER: ly one)	PAGE 89/101
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30
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NAME OF COMMITTEE (In Full) American College of Radiology Associat	on Political Action Comm	nittee		
Full Name (Last, First, Middle Initial) Pat Meehan For Congress			Transaction ID: Date of Disburse	ment
Mailing Address 5035 Township Line Re PO Box 308	oad		03 00	9 / Y Y O 1 1 Y
City Drexel Hill	State Zip Code PA 19026		Amount of Each	Disbursement this Period
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Candidate Name Mr. Patrick Meehan		O11 Category/ Type		
	sement For: 2012 X Primary General Other (specify)			
Full Name (Last, First, Middle Initial) Ben Cardin For Senate			Transaction ID: Date of Disburse	
Mailing Address P.O. Box 21093			03 1	6 Y 2011
City Catonsville	State Zip Code MD 21228		Amount of Each	Disbursement this Period
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Candidate Name Mr. Benjamin Cardin		011 Category/ Type		
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Full Name (Last, First, Middle Initial) John Sullivan For Congress Inc			Transaction ID: Date of Disburse	
Mailing Address Post Office Box 47084)		03 1	0 2011
City Tulsa	State Zip Code OK 74147		Amount of Each	Disbursement this Period
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Candidate Name Rep. John Sullivan		Category/ Type		
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Association	e and address of any political con	nmittee to		
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	Full Name (Last, First, Middle Initial) JOEPAC Mailing Address 62 PARADISE LANE			Transaction ID Date of Disburs	
	City RONKS	State Zip Code PA 17572		Amount of Each	n Disbursement this Period
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	Candidate Name JOEPAC	C	011 ategory/ Type		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)			
	Full Name (Last, First, Middle Initial)			Transaction ID	· 39229298
	Martin Heinrich For Congress, Inc.			Date of Disburs	ement
	Mailing Address 2118 Central Avenue Se #71			03 / 0	15 Y 2011Y
	City Albuquerque	State Zip Code NM 87106		Amount of Each	Disbursement this Period 5000.00
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		ement For: 2012 Primary General Other (specify)	<i>"</i>		
	Full Name (Last, First, Middle Initial) Heller For Congress			Transaction ID Date of Disburs	ement
	Mailing Address PO Box 750580			03 / 0	11 Y ŽOŽIY
	City Las Vegas	State Zip Code NV 89136		Amount of Each	n Disbursement this Period
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	Candidate Name Mr. Dean Heller		ategory/ Type		
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NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Victory Now PAC Mailing Address 10805 Concord Street Sulte 202 City State Zip Code Kensington WD 20895 Purpose of Disbursement Candidate Name Victory Now PAC Office Sought: House Roswell GA 30077 Purpose of Disbursement Candidate Name Candidate Name Conflice Sought: Y 2 0 1 1 7 Amount of Each Disbursement this Perice Roswell Candidate Name Conflice Sought: Y 2 0 1 1 7 Amount of Each Disbursement this Perice Roswell Candidate Name Conflice Sought: Y 2 0 1 1 7 Amount of Each Disbursement this Perice Roswell Candidate Name Conflice Sought: Y 2 0 1 1 7 Amount of Each Disbursement this Perice Roswell Candidate Name Conflice Sought: Y 2 0 1 1 7 Amount of Each Disbursement this Perice Roswell Candidate Name Conflice Sought: Y 2 0 1 1 7 Amount of Each Disbursement this Perice Roswell Candidate Name Candidate Name Conflice Sought: Y 2 0 1 1 7 Amount of Each Disbursement this Perice Roswell Candidate Name Ca		Detailed Sumr	mary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Victory Now PAC Mailing Address 10605 Concord Street Sulte 202 City State Zip Code Kensington MD 20895 Purpose of Disbursement Candidate Name Victory Now PAC Office Sought: House President State President State: District: Full Name (Last, First, Middle Initial) Price For Congress Mailing Address P.O. Box 425 City State Zip Code GA 30077 Purpose of Disbursement Candidate Name GA 30077 Purpose of Disbursement Candidate Name Rep. Thomas Edmunds Price, M.D. Office Sought: House Disbursement For: 2012 Senate President State: GA District: Other (specify) ▼ Amount of Each Disbursement Initial Price of Disbursement For: 2012 Amount of Each Disbursement Initial Price of Disbursement Initial Initial Price of Disbursement Initial Initi	or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	me and address of	any political com	nmittee to sol	
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Victory Now PAC Office Sought: House Senate Primary General Other (specify) President Other (specify) State: District: Full Name (Last, First, Middle Initial) Price For Congress Mailing Address P.O. Box 425 City State Zip Code GA 30077 Purpose of Disbursement O11 Category/Type Candidate Name Rep. Thomas Edmunds Price, M.D. Office Sought: X House President President Other (specify) State: GA District: 06 Disbursement For: 2012 Senate President Other (specify) State: GA District: 06 Transaction ID: 39300174 Date of Disbursement City State: GA 30339 Purpose of Disbursement Transaction ID: 39300174 Date of Disbursement City State: GA 30339 Purpose of Disbursement Office Sought: Value of Disbursement City State Zip Code Allanta GA 30339 Purpose of Disbursement Office Sought: Value of Disbursement Condidate Name Voice for Freedom Category/Type Office Sought: Primary General Primary General Other (specify)		MD 20	1895	011	1500.00
Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Price For Congress Mailing Address P.O. Box 425 City State Zip Code GA 30077 Purpose of Disbursement Candidate Name Rep. Thomas Edmunds Price, M.D. Office Sought: X House President State: GA District: 06 Full Name (Last, First, Middle Initial) Primary General Other (specify) ▼ Transaction ID: 39250058 Date of Disbursement Mailing Address P.O. Box 425 Transaction ID: 39250058 Date of Disbursement Mailing Address P.O. Box 425 Transaction ID: 39250058 Date of Disbursement this Peric GA 30077 Amount of Each Disbursement this Peric Senate GA District: 06 Full Name (Last, First, Middle Initial) Voice for Freedom Mailing Address 2451 Cumberland Parkway Suite 326 City State Zip Code Atlanta GA 30339 Purpose of Disbursement Candidate Name Voice for Freedom Office Sought: House Senate Primary General Other (specify) ▼ Disbursement For: Senate Primary General Other (specify) ▼ Disbursement For: Other (specify) ▼ Disbursement For: Other (specify) ▼ Category/ Type	Victory Now PAC		l l	0,	
Full Name (Last, First, Middle Initial) Price For Congress Mailing Address P.O. Box 425 City State Zip Code GA 30077 Purpose of Disbursement Candidate Name Rep. Thomas Edmunds Price, M.D. Office Sought: X House President State: GA District: 06 Full Name (Last, First, Middle Initial) Voice for Freedom Mailing Address 2451 Cumberland Parkway Suite 326 City State Zip Code GA 30077 Type Transaction ID: 39250058 Date of Disbursement Initial District Price Initial State Initial Price Initial State Initial Init	Senate President	Primary			
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Roswell GA 30077 Purpose of Disbursement Candidate Name Rep. Thomas Edmunds Price, M.D. Office Sought: X House Senate President President State: GA District: 06 Full Name (Last, First, Middle Initial) Voice for Freedom Mailing Address 2451 Cumberland Parkway Suite 326 City State Zip Code Atlanta GA 30339 Purpose of Disbursement Candidate Name Voice for Freedom Office Sought: House Disbursement For: 2012 X Primary General Disbursement Mailing Address 2451 Cumberland Parkway Suite 326 Amount of Each Disbursement this Peric Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼					03 17 2011
Candidate Name Rep. Thomas Edmunds Price, M.D. Office Sought:	Roswell				
Office Sought:	Candidate Name			ategory/	1500.00
Voice for Freedom Mailing Address 2451 Cumberland Parkway Suite 326 City State Zip Code Atlanta GA 30339 Purpose of Disbursement Candidate Name Voice for Freedom Office Sought: House Senate Primary General President President Date of Disbursement M M M / 2 2 D / Y 2 0 1 1 1 Amount of Each Disbursement this Period Category/ Type Office Sought: Primary General Other (specify) ▼	Office Sought: X House Senate President Disbur	X Primary	2012 General	Турс	
City State Zip Code Atlanta GA 30339 Purpose of Disbursement Candidate Name Voice for Freedom Office Sought: House Senate Primary General President Other (specify)	,				Date of Disbursement
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Candidate Name Voice for Freedom Office Sought: Disbursement For: Senate Primary General Other (specify)	Atlanta				
Office Sought: House Senate Primary President Disbursement For: Primary General Other (specify) ▼	Candidate Name			ategory/	2500.00
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Full Name (Last, First, Middle Initial) Price For Congress			Transaction ID: 39301063 Date of Disbursement
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City Roswell	State Zip Code GA 30077		Amount of Each Disbursement this Peri
Purpose of Disbursement		011	3500.00
Candidate Name Rep. Thomas Edmunds Price, M.D.		Category/ Type	
Senate President	sement For: 2012 K Primary General Other (specify)		
State: GA District: 06 Full Name (Last, First, Middle Initial)			Transaction ID: 39301230
Price For Congress			Date of Disbursement
Mailing Address P.O. Box 425			03
City Roswell	State Zip Code GA 30077		Amount of Each Disbursement this Peri
Purpose of Disbursement		011	5000.00
Candidate Name Rep. Thomas Edmunds Price, M.D.		Category/ Type	
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City	State Zip Code		Amount of Each Disbursement this Peri
Glastonbury Purpose of Disbursement	CT 06033		5000.00
Candidate Name Rep. John B. Larson		011 Category/ Type	
Senate	sement For: 2012 K Primary General		
State: CT District: 01	Other (specify) ▼		

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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NAME OF COMMITTEE (In Full) American College of Radiology Associat			
Full Name (Last, First, Middle Initial) Schock For Congress			Transaction ID: 39302513 Date of Disbursement
Mailing Address PO Box 10555			03
City Peoria	State Zip Code IL 61612		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1500.00
Candidate Name Rep. Aaron Schock		Category/ Type	
Senate President	sement For: 2012 X Primary General Other (specify)		
State: IL District: 18 Full Name (Last, First, Middle Initial)			Transaction ID: 39303934
Mike Ross For Congress Committee			Date of Disbursement
Mailing Address PO Box 360			03
City Prescott	State Zip Code AR 71857		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2500.00
Candidate Name Rep. Michael Avery Ross		Category/ Type	
X	sement For: 2012 X Primary General Other (specify)		
State: AR District: 04 Full Name (Last, First, Middle Initial)			Transaction ID: 39400725
Kristi For Congress			Date of Disbursement
Mailing Address PO Box 852			03
City Sioux Falls	State Zip Code SD 57101		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Ms. Kristi Noem		Category/ Type	
Senate President	sement For: 2012 X Primary General Other (specify)		
State: SD District: 01			
SUBTOTAL of Disbursements This Page (optional	,		6500.00

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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NAME OF COMMITTEE (In Full) American College of Radiology Association	on Political Action Committ	ee	
Full Name (Last, First, Middle Initial) Marsha Blackburn For Congress Inc.			Transaction ID: 39400772 Date of Disbursement
Mailing Address PO Box 682185			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ O & 1 \end{smallmatrix} \end{bmatrix} \ Y$
City Franklin	State Zip Code TN 37068		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name Rep. Marsha Blackburn		Category/ Type	
Senate President	ement For: 2012 Primary General Other (specify)		
State: TN District: 07 Full Name (Last, First, Middle Initial)			Transaction ID: 39400775
Democratic Senatorial Campaign Commi			Date of Disbursement
Mailing Address 120 Maryland Avenue N	lortheast		03 23 2011
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name Democratic Senatorial Campaign Commi	ttee	Category/ Type	
Office Sought: House Disburs	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Commi	ttee		Transaction ID: 39400776 Date of Disbursement
Mailing Address 120 Maryland Avenue N	lortheast		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & 2 & 0 & 1 & 1 \end{bmatrix}$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name Democratic Senatorial Campaign Commi	ttee	Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			15000.00

SCHEDULE	B (FEC Form 3X) Use sep	arate schedule(s)	_	NUMBER: PAGE 95 / 101
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					or the purpose of soliciting contributions licit contributions from such committee
NAME OF CON	MMITTEE (In Full) lege of Radiology Asso				
,	, First, Middle Initial) enatorial Campaign Co	ommittee			Transaction ID: 39400777 Date of Disbursement
Mailing Address	120 Maryland Aver	nue Northeast			$\begin{bmatrix}\begin{smallmatrix}M&3&M\\0&3&\end{smallmatrix}\end{bmatrix} / \begin{bmatrix}\begin{smallmatrix}D&0&0\\2&3&\end{smallmatrix}] / \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}$
City Washington		State DC	Zip Code 20002		Amount of Each Disbursement this Period
Purpose of Disk Candidate Nam				011	5000.00
	enatorial Campaign Co	isbursement For:		Category/ Type	
-	Senate President	Primary Other (sp	General ecify) ▼		
•	District: , First, Middle Initial)				Transaction ID: 39418262
Sue Myrick F					Date of Disbursement O 3 M / D 2 B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charlotte		State NC	Zip Code 28237		Amount of Each Disbursement this Perio
Purpose of Disk	pursement	NC .	20237	011	1500.00
Candidate Nam Rep. Sue Wil				Category/ Type	
Office Sought: State: NC	X House D Senate President District: 09	isbursement For: X Primary Other (sp	2012 General ecify) ▼		
Full Name (Last	First, Middle Initial)				Transaction ID: 39425596 Date of Disbursement
Mailing Address	6849 Old Dominion Suite 222	n Drive			03 / 29 / 2011
City McLean		State VA	Zip Code 22101		Amount of Each Disbursement this Perio
Purpose of Disk				011	2500.00
	e itical Action Committee			Category/ Type	
Office Sought:	House D Senate	isbursement For: Primary	General		
ooo ooog	President	Other (sp	ecify)		
State:		Other (sp	ecify) 🔻		9000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	,			INE NUMBER: PAGE 96 / 101										
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NAME OF COMMITTEE (In Full) American College of Radiology Associate															
Full Name (Last, First, Middle Initial) A. Friends Of Joe Pitts									ID :		3942 ent	559	8		
Mailing Address PO Box 775					- [o ^M 3	М	/	^D 2	9	/	Y	ž 0 ť	1 Y	
City Unionville	State Zip Code PA 19375				A	mou	ınt o	of E	ach	D	isburs	-	nt this		od
Purpose of Disbursement		-	011	_			-				•	20	0.00	0	
Candidate Name Rep. Joseph R. Pitts	rsement For: 2012	1	teg Type	ory/ e	_										
Senate President	X Primary General Other (specify)														
State: PA District: 16 Full Name (Last, First, Middle Initial)															
B. Kinzinger For Congress					[ate			ourse	em				* V	
Mailing Address PO Box 1050						o ^M 3	IVI	<u></u>	້2	2 9			ž 0 ť	1	
City Bourbonnais	State Zip Code IL 60914				<i>A</i>	mou	ınt o	of E	ach	D	isburs		nt this		od
Purpose of Disbursement			011	i		-	-			0	-	I	500.0	ů	
Candidate Name Mr. Adam Kinzinger			iteg Type	ory/ e											
Senate President	x Primary Qeneral Other (specify)														
State: IL District: 11 Full Name (Last, First, Middle Initial) Guthrie For Congress									n ID:		3942 ent	561	5		
Mailing Address PO Box 9639						o ^M 3	М	/	□3	3 0	/	Y	ž 0 ť	1 Y	
City Bowling Green	State Zip Code KY 42102				1	mou	ınt o	of E	ach	D	isburs	-	nt this	-	od
Purpose of Disbursement			011									20	0.000	0	
Candidate Name Rep. Brett Guthrie		Ca	_	ory/											
Senate President	xsement For: 2012 X Primary General Other (specify)	-		_											
State: KY District: 02															
SUBTOTAL of Disbursements This Page (options	(l											55	0.00	0	
TOTAL This Period (last page this line number or	ly)			•											

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	(check only	NUMBER: PAGE 97 / 101
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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NAME OF COMMITTEE (In Full) American College of Radiology Associati	on Political Action Commit	tee	
Full Name (Last, First, Middle Initial) Heath Shuler For Congress			Transaction ID: 39425619 Date of Disbursement
Mailing Address PO Box 8446			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix} $
City Asheville	State Zip Code NC 28814		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name Rep. Heath Shuler		Category/ Type	
Senate President	sement For: 2012 X Primary General Other (specify) ▼		
State: NC District: 11 Full Name (Last, First, Middle Initial)			T
Friends Of Nan Hayworth			Transaction ID: 39425626 Date of Disbursement
Mailing Address P. O. Box 189			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & 1 & 1 \end{bmatrix} \ \ \end{bmatrix}$
City Mount Kisco	State Zip Code NY 10549		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	1500.00
Candidate Name Ms. Nan Hayworth		Category/ Type	
Senate President	sement For: 2012 X Primary General Other (specify) ▼		
State: NY District: 19 Full Name (Last, First, Middle Initial)			Transaction ID: 39428556
Friends Of Jim Clyburn			Date of Disbursement
Mailing Address PO Box 12567			
City Columbia	State Zip Code SC 29211		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name Rep. James E. Clyburn		Category/ Type	
Senate President	sement For: 2012 X Primary General Other (specify) ▼		
State: SC District: 06			
SUBTOTAL of Disbursements This Page (optional)		7500.00

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L	American College of Radiology Assoc	iation Political Action Comr	nittee)									
	Full Name (Last, First, Middle Initial) Sue Myrick For Congress Mailing Address P.O. Box 37091							isburs	_	94286 nt) ^Y 1	Y
	City Charlotte	State Zip Code NC 28237				Amou	ınt o	f Each	n Disl	burser			eriod
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	Candidate Name Rep. Sue Wilkins Myrick		C	ate Ty	gory/ pe								
	Office Sought: X House Dis Senate President State: NC District: 09	bursement For: 2012 X Primary General Other (specify)											
	Full Name (Last, First, Middle Initial)					Trans	sacti	on ID	: 39	94288	334		
	Dave Camp For Congress					M	of D	isburs	D	nt / Y	Y	Y	Υ
	Mailing Address 5915 Eastman Aver Suite 100	iue				0 3		;	3 1	L	2 () 1 1	_
	City Midland	State Zip Code MI 48640	_			Amou	ınt o	f Each	n Disl	burser			erio
	Purpose of Disbursement			01	1	L.					200	0.00	
	Candidate Name Rep. David Lee Camp		С	ate Ty	gory/ pe								
	Office Sought: X House Senate President State: MI District: 04	bursement For: 2012 X Primary General Other (specify)											
	Full Name (Last, First, Middle Initial) Tiberi For Congress							on ID	_	94288		V	V
	Mailing Address 2931 E Dublin Gran Suite 190	ville Road				0 3		<u> </u>	3 1	Ĺ	2 () 1 1	
	City Columbus	State Zip Code OH 43231				Amou	ınt o	f Each	n Disl	burser			erio
	Purpose of Disbursement			01	1] L.					350	0.00	-
	Candidate Name Rep. Patrick J. Tiberi]	ate Ty	gory/ pe								
	Office Sought: X House Senate President State: OH District: 12	bursement For: 2012 X Primary General Other (specify)	•										
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	Name (Last, nock For Co	First, Middle Initial) ongress								e of	Dis	burs	eme	39428 ent				
Maili	ing Address	PO Box 10555							O	3 ^M	_ ′	D 3	3 0		ž	0 Ť	1 Y	
City Peo				State IL	Zip Code 61612				Am	ount	of	Each	n Dis	sburse	-	-		od
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	didate Name o. Aaron Sc	hock				С	atec Typ	gory/ be										
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State	e: IL	District: 18		Other (sp	ecity) $lacksquare$													
	Name (Last, unteers For	First, Middle Initial) Shimkus	•									n ID burs		39428 ent	3907	,		
Maili	ing Address	PO Box 5458							0	3 ^M	′	D 2	2 5] / [Ž	0 Ť	1 Y	
City Spri	ingfield			State IL	Zip Code 62705				Am	ount	of	Each	n Dis	sburse	emen	t this	Peri	od
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	didate Name o. John M. S	Shimkus				С	-	gory/										
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State	e: IL	District: 19			,, ,													
		First, Middle Initial) or Congress							-			burs	_	39429 ent				
Maili	ing Address	3161 Dixie High Suite F	nway						0	3 ^M	_ ′	D 3	3 0		ž	0 Ť	1 Y	
City Erla	anger			State KY	Zip Code 41018				Am	ount	of	Each	n Dis	sburse	emen	t this	Peri	od
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	didate Name o. Geoffrey	Davis				С	_	gory/										
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\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Association	n Political Action	Committee	е				
	Full Name (Last, First, Middle Initial)				Transaction ID:	394294	52	
	Kind For Congress Committee				Date of Disburs	ement		V
	Mailing Address 205 5th Avenue South Suite 428				03	3 0 / Y	ž 0 1	1
	,	State Zip C WI 5460			Amount of Each			
	Purpose of Disbursement			011			2000.0	Ŏ .
	Candidate Name Rep. Ron Kind			Category/ Type				
			012 General					
	Full Name (Last, First, Middle Initial)				Transaction ID	204207	00	
	Value in Electing Women PAC (View PAC)				Date of Disburs	ement		V
	Mailing Address 701 8th Street, N.W. Suite 500				03 / 2	29 / Y	žoť	1
		State Zip C DC 2000			Amount of Each			
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	Candidate Name Value in Electing Women PAC (View PAC)			Category/ Type				
	Office Sought: House Disburse Senate President		General					

SUBTOTAL of Disbursements This Page (optional)	•	3500.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Statemer for commercial purposes, other than using the name	for each category of the Detailed Summary Page (check on 21b 27) ents may not be sold or used by any person and the content of the content o	22 23 24 25 26 28a 28b 28c X 29 30b for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Association		well committee
Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 27025		Transaction ID: 39675623 Date of Disbursement M M M / D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code VA 23261-7025 001 Category/ Type	Amount of Each Disbursement this Period 2189.51
Office Sought: House Disburser Senate President State: District:	* * * * * * * * * * * * * * * * * * * *	Bank Fees

SUBTOTAL of Disbursements This Page (optional)	•	2189.51
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